

# Johnston County Public Health Department



*Prevent*  
*Promote*  
*Protect*



COMMUNITY HEALTH ASSESSMENT

2014

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## Acknowledgements

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### 2014 Community Health Assessment Committee

<b><u>Name</u></b>	<b><u>Organization</u></b>	<b><u>Role</u></b>
Abel Aguilar	Vision of the Lamb Ministries	Provided Latino faith community prospective, conducted a focus group and offered input
Christine Allen	Mt. Zion Church of Deliverance	Provided faith community opinions and input
Christy Barfield	Johnston County Health Department	Lead Agency for the Community Health Assessment
Connie Barnes	Board of Health, Campbell University	Serving as a liaison between public health and Campbell University
Elaine Marshall	Health Professional, Smithfield Rotary Club	Member of Community Health Assessment Team, provided input
Eugene Maynard	Board of Health, Benson Area Medical	Provided data and input, Local Medical Provider
Kimetha Fulwood	Johnston County Public Health Department	Lead Agency for the Community Health Assessment
Kyle McDermott	Johnston UNC Health Care	Provided data for Health Assessment and insight for the health assessment
Lloyd Barnes	Serve the Need in JC, Wilson Mills Town Council	Member of Community Health Assessment Team
Lori Anderson	Board of Health, Johnston Community College	Member of Community Health Assessment Team, provided input

Maria Aguilar	Vision of the Lamb Ministries	Provided Latino faith community prospective, conducted a focus group and offered input
Marilyn Pearson	Johnston County Health Department	Lead Agency for the Community Health Assessment
Oliver Johnson	Board of Health, Johnston County Schools	Provided Johnston County Public School data sets, participated in the Community Health Assessment Survey
Sterling Freeman	First Missionary Baptist Church, Smithfield	Provided faith community suggestions, distributed Community Health Assessment Surveys and input
Steve Strickland	Johnston County Health Department, Behavioral Health Division	Lead Agency for the Community Health Assessment
Tierra Taylor	Johnston County Public Health Department	Lead Agency for the Community Health Assessment

Special thanks to the residents of Johnston County and all of those in the community and on the Community Health Assessment Committee who helped to make this process a success. Everyone listed above had very specific but important responsibilities. This process was made possible thanks to your survey distribution, community input, focus groups and data collection methods.

## Executive Summary

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The Community Health Assessment (CHA) is based on primary and secondary statistics and involves collecting data from our community. To make this an inclusive document, many of our partners and residents provided input. As we worked to develop new priorities, we reviewed the areas of concern from our 2010 CHA and the progress made through action plans. Those areas were obesity, diabetes, access to healthcare, cancer, and injury prevention with a focus on teen motor vehicle deaths. Our partners worked together to develop programs and policies to target these areas of concern and had many successes. For example, a Teen Driving Committee was formed that provided peer counselors and programs in our high schools leading to a significant decline in the teen motor vehicle death rate.

Based on the current data review, our CHA Committee, consisting of representatives from the Board of Health and 12 partner agencies, chose 3 top priority areas:

- access to health care—physical and behavioral health;
- obesity and overweight;
- nutrition and physical activity.

The other main areas of concern were access to:

- mental health, particularly substance abuse services;
- dental care.

Johnston County is a largely rural county. Access to health care, which impacts quality of life, is affected by transportation as well as affordability. Of 336 survey participants, 35% felt that low income, unemployment, and poverty were the main issue affecting quality of life in Johnston County. The poverty rate in 2013 for Johnston County was 16.8% and almost 1 in 5 residents under 65 were uninsured. So, although access to care was a priority area in 2010, it continues to be an area of concern for our community.

Obesity, overweight and physical inactivity levels all contribute to the chronic disease rates. In Johnston County in 2013, heart disease was the leading cause of death with cancer being number two. With a focus on risky health behaviors, the 28% of adults reporting physical inactivity and 33% obesity rate (2010) can be modified. Many of our residents are concerned about the health of our children. Thirty-five percent of adults participating in our survey acknowledged the need for education and programs focusing on obesity, exercise, and nutrition for their children. By focusing on these two areas related to behavior and lifestyle changes, the risk for chronic disease can be decreased.

Limited mental health and dental providers contributes to residents reporting overall poor health. The mental health provider ratio for Johnston County is 1,942:1 as compared to 715:1 for North Carolina (2010) and the dental provider ratio is 5,049:1 (NC is 2,075:1). These provider shortages, residents reporting 4.2 poor mental health days over the past 30 days, and the expressed need for access to dental care shows the essential need to find ways to integrate all aspects of care.

Although it is difficult to make year to year comparisons with the county health rankings due to changes and data sources, Johnston County has improved from 2010 to 2014. Out of 100 counties, Johnston County is number 28 in health outcomes and has moved from number 50 in health factors to number 39. Although we achieved many positive outcomes, we continue to pursue avenues that will promote a healthier and safer environment for our community.

This Community Health Assessment will provide background information on our county, a data summary, and an overview of the health status of our community. The report will be utilized for strategic health planning in and by our community. In the future, the Johnston County Health Department and its partners will work to mobilize the community to develop Community Action Plans for the priority areas that will provide creative solutions and the opportunity for collaboration. This document and action plans will be widely disseminated to the community.

## Background and Introduction

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Every four years, the Johnston County Health Department and our partners are tasked with assessing the state of the health of our community through a Community Health Assessment (CHA) process. The 2014 CHA utilized data provided from many data sources and the community and seeks to provide that information in a format that makes it useful for targeted community planning efforts.

The CHA process is a continual work in progress and we started collecting data in 2011 after the previous CHA was completed. The primary data has been gathered over the past 4 years through community surveys, open forums, community festivals, listening sessions, and comments from our website. The secondary data sources are listed at the end of the document. To focus on health disparities, multiple outreach activities were conducted to gather information from traditionally hard to reach populations.

The process revealed differences in health status based on age, race and ethnicity, economic status, gender and income. Throughout the document, a focus on these disparate groups is emphasized through the differences in morbidity and mortality rates.

The CHA is arranged by chapters and will provide an overview of Johnston County data in relation to Healthy North Carolina 2020.

The CHA requires new ideas and input from the community in order to achieve the ultimate goal: Healthy Johnstonians in All Communities.

If you would like to be involved in this process and contribute to the work groups developing action plans for our priority health concerns, please contact Kimetha Fulwood, Health Educator at 919-989-5200.

## Johnston County: A Brief Description

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### Geography

Considered the midpoint between New York and Florida on highway 95, Johnston County is only a 2 hour drive from the splashing waves of the Atlantic coast and 4 short hours from the beautiful rolling mountains of the Blue Ridge Parkway. The County is located in the east central section of North Carolina, situated on the fall zone between the Piedmont and Coastal Plain provinces. The County seat, Smithfield, is located on North Carolina's central principal river, the Neuse, which is a major water source for the County. The County border is located approximately 15 miles southeast of Raleigh, North Carolina and 45 miles north of Fayetteville, North Carolina. There are 791.85 square miles of land area in the County's 506,377 acres.

Johnston County is known for barbecue and our many local seasonal festivals. Interstates I-40 and I-95 and highways 70, 301, 701 run through the county. Carolina Premium Outlets, located on the I-95 corridor, provides shopping and eateries to travelers and a boost to our local economy.

Johnston County is ranked 2<sup>nd</sup> in the production of flu-cured tobacco for 2012. However, the number of farmers in the county is steadily declining from 1,700 in 2000 to 1,245 in 2007 and 1175 in 2012. The average age of a Johnston County farmer was 57.6 years. Farms operated by full time farmers totaled 548. Of annual sales reported, 50 percent of farmers reported less and \$10,000 and 20 percent reported greater than \$100,000. Reporting over \$265 million in sales, Johnston County ranks 10<sup>th</sup> in the state for total agricultural products sold. Farmland in the County is primarily devoted to crops.

The average annual climate is 60.3 degrees Fahrenheit and the average rainfall is 45.52 inches. Average snow is 3.34 inches and the County elevation is 155 feet. The gentle, rolling hills and inclines compose the topography of Johnston County.

(References 1, 2, 3, 4)

### History

Johnston County was originally inhabited by Tuscarora Indians, most of whom migrated to New York to join the Iroquois, to whom they were related when their efforts to resist European settlement in the area ended with defeat in the Tuscarora War (1711-13). The county of Johnston was created in 1746 from Craven County and named in honor of Gabriel Johnston, North Carolina's royal governor at the time. Johnston County originally contained most of what is now Wake, Wayne, Greene, Lenoir counties and part of Wilson County. The county's first town, Smithfield, was established as an early trading post along the banks of the Neuse River at Smith's Ferry. The courthouse



was moved there in 1771, and the town was incorporated in 1777. In 1770 the colonial assembly had attempted to boost North Carolina's tobacco trade by erecting a warehouse near Smith's Ferry for receiving and storing tobacco to be shipped down the Neuse River to the sea. Nonetheless, it would be another century and a quarter before this product would gain the attention of Johnston's commercial farmers. Later during the nineteenth century, cotton emerged as Johnston County's chief product during the extension of the railroad. This event facilitated the shipment of cotton for commercial purposes. Located at the junction of the North Carolina and Atlantic Coast Line railroads, Selma became the county's second commercial center. During the late nineteenth century, Fluctuating cotton prices paved the way for a rise in tobacco production, bringing the county a new prosperity. Today, Johnston County continues to be a state leader in the production of flue-cured tobacco. Various historical events bring travels to our state. Most notably the Johnston County's Bentonville Battleground State Historic Site, which commemorates the last major battle of the Civil War and celebrates its 150 year anniversary in 2015. This battle is remembered as the largest military engagement in North Carolina's history. The county is also home to the Ava Gardner Museum in Smithfield, a tribute to the Johnston County native and screen legend. The county is known for its many local festivals. Annually, the town of Benson hosts one of the state's largest festivals, Mule Days, which draws 40,000-50,000 attendees. Additionally, exhibits on the history of tobacco farming in the state can be found at The Tobacco Farm Life Museum in Kenly.

(References 5, 6, 7, 8, 9, 10)

### **Population Demographics**

The projected population for Johnston County in 2013 was 177,967 (U.S. Census Bureau). Based on demographic profiles from 2010-2013, there was a 5.4% (9,089) increase in the County's population. During 2013, Johnston County was the 12<sup>th</sup> fastest growing county in the state. The projected population for 2014 is 179,822. A 15.9% change of growth is expected from 2010 to 2020

(References 11, 12)

*Please refer to Appendix A*

### **2013 Population Estimates by Race/Ethnicity**

Population change is impacted by several components which include natural increase, vital events such as births and deaths and net migration. The County's population for

2013 is estimated at 80.5% White, 15.9% African-American, 0.9% American Indian or Alaska Native, 0.7% Asian, 1.8% two or more races. Those of Hispanic or Latino Origin make up 13.2% of the total population. Johnston County is ranked 13<sup>th</sup> in the state in total population size and 13<sup>th</sup> in the state for total growth). The Hispanic or Latino population has increased from 11.7% in 2009 to 13.2% estimated in 2013. Of the 13.2% total Hispanic population, the Mexican population represents the greatest percent at 8.7% (15,501 individuals). There are 5,008 individuals who identify with Hispanic or Latino but not Mexican, Puerto Rican or Cuban.

(Reference 13)

*Please refer to Appendix A-C*

### **2013 Population Estimates by Age and Gender**

In 2013 Johnston County population estimate for children between the ages 0 – 19 reflects an estimated 29.4% of the total population. The population of children between the ages of 10-14 years old represents the majority of the child population with a total of 14,147 children. The 35-44 year old age group represents the highest percentage of the population at 16.2%. The two smallest age groups represented in Johnston County are the 75-84 year olds 3.4% and 85 and older age group at 1.0%. The median age in Johnston County is 37.5 which is based on projected population data. In Johnston County, 51% of the population is female while the males represent 49%. The data correlates to health risk conditions for that age group. For example, a high young adult population is at risk for injury while 23.4% of the population is over 55 and at risk for heart disease, cancer, disability, etc.

*Please refer to Appendix D-F*

## Data Collection

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The Johnston County Public Health Department is the lead agency in the Community Health Assessment process. Throughout the year of 2014, the team took steps to collect a range of statistics which will be used as both primary and secondary data. Johnston County Health Department and partners also joined community groups, working groups, and served on an assortment of boards and coalitions where statistical information and community input is shared. The team also enlisted the help of community partners, non-profits and other state agencies in order to collect the most up to date and accurate information.

During a collaborative effort between Campbell University's Masters level public health students and Johnston County Public Health, key informant interviews, focus groups and a community health forum were conducted in order to gather primary input from diverse groups of community members. The summary of the key informant interviews included some discussion regarding key health concerns which included access to care, obesity, diabetes and cardiovascular disease. There was praise of successful health programs such as human service agencies collaboration efforts, School Health Advisory Council, Childhood Immunization Program and prenatal program. The programs that needed some improvement were collaborative efforts between programs with the same focus, programs to assist those in poverty, improving access to care with reduced unemployment and uninsured and county wide transportation. The health priorities mentioned included focusing on prevention, reducing obesity and educating about healthy eating and exercise, admission to affordable health care, improving health outcomes related to cardiovascular disease and heart failure and education about nutrition and exercise to prevent diabetes and obesity.

The suggestions from the forum attendees focused on providing information to residents. These included distribution of information by placing resource information at local medical provider offices and utilizing high traffic areas to provide information to residents such as town halls and utility offices. The idea of attaching important information on to residents' electric or utility bills to disseminate information was brought up as well.

Our county also held a Latino Churches Community Forum. During the forum the major health concerns discussed included the cost of health insurance, cost of health care for the uninsured, increasing fees for health services, options for undocumented adults for health insurance, assistance with hospital bills, Medicaid coverage for children, long wait times (medical) and transportation, low paying jobs and affordability of insurance.

There was also mention of services that needed to be offered in the county such as nutrition counseling and dental health services.

At a Johnston County Citizens Association Listening Session, some of the concerns and suggestions were increasing the number of medical providers, access to mental health services, substance abuse treatment, prescription drug misuse and overdose, programs for the youth in the community, options for dental care for the uninsured and county transportation options.

An additional listening session held at a local African American church, the State of Our Children Conversation, included ideas for community focus areas. The focus areas included partnering with families and children, venues for nurturing relationships between schools and families and workshops for skill building and adopt-a-family programs. The conversation also included suggestions for improving the health of children and families. The given suggestions were community development programs, parental development workshops, youth/student development workshops and equity training for the community, schools and law enforcement.

At the Faith Food Pantry and Johnston County Industries listening sessions, concerns mentioned included difficulty paying the co-pay for health care, not enough jobs, hard for families to eat healthy due to cost of healthy foods, not enough food banks, the need for a central clearing house for all health information and equal treatment of all patients. Their suggestions for improvement consisted of more jobs, Medicaid and Health Choice for young adults, affordable health insurance, equal access to health care for all with assistance if needed (ex. Deaf or hard of hearing), health care of low income people and access to programs for low income youth.

Lastly, the Johnston Health 2013 Community Health Needs Assessment meeting identified significant health needs that should be addressed. These included affordability and accessibility to health care, coronary heart disease, diabetes, cancer, physician shortage, mental health/suicide, obesity/overweight and maternal and infant measures.

As mentioned earlier, the team also used a variety of sources to gather secondary data. Sources will be referenced throughout and a list of resources will be given at the end of the assessment document. For the purpose of this assessment, the following counties have been identified as Johnston County's peer counties: Craven, Davidson, Harnett, Randolph, Union, Wayne, and Wilson.

## Community Health Status

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### Mortality

The overall mortality rate for all causes in Johnston County has declined throughout the years. However, Johnston County has had a higher mortality rate than North Carolina. The mortality rate in Johnston County was 836.1 compared to the North Carolina (790.9) in the five year period of 2009-2013. The 2010 Community Health Assessment reports the mortality rate was 888.3 for the 2005-2009 period. One rationale for such a decrease in the overall mortality rate may be the number of births or younger individuals migrating to Johnston County.

The top five leading causes of death in Johnston County are the following: Heart disease, cancer, cerebrovascular disease, chronic lower respiratory and other unintentional injuries. Currently, heart disease is the leading cause of death in Johnston County followed by cancer (24.6%). Of the five leading causes of death, 25.8% of Johnston County residents died from heart disease in 2013. Johnston County had a slightly higher percent of deaths from heart disease than the state by 4.4%. The leading causes of death include the following variables: age between 0-99 years, all races, and both genders. Johnston County had heart disease rate of (185.4) per 100,000 population was slightly higher than the State in 2013. However, the respiratory (176.4) and cancer rate (37.1) was lower than the state.

*Please refer to Appendix G-K*

(Reference 15)

### Age Specific Death Rate

The leading causes of death is categorized by age groups based on a five year period from 2009-2013. The top five leading causes of death for all ages are heart disease, cancer, cerebrovascular disease, chronic lower respiratory disease, and all other unintentional injuries. However, Johnston County has a lower cancer rate (167.5) than the state (188.1) and a higher heart disease rate (186.2) compared to North Carolina (178.9). For the population age group 0-19 (8.2) and 20-39 (24.7), motor vehicle injuries is the second leading cause of death in Johnston County. For these particular age groups, there are usually more motor vehicle related injuries, possibly due to limited driving experience and rural road architecture. In addition, for the 20-39 age group,

substance use, in particular alcohol may be a contributing factor for motor vehicle injuries. For the population over the age of 40, the top causes of death are cancer or heart disease. Many factors likely contribute to this increase in chronic disease conditions and deaths, including unhealthy food choices, inactivity and underutilized access to preventive services.

*Please refer to Appendix L*

#### Race/Sex Specific Death Rate

The leading causes of death are categorized by race and sex based on a five year period from 2009-2013. The top leading cause of death for White non-Hispanic males (283.9), white non-Hispanic females (188.4), and African American non-Hispanic females (193.5) is heart disease. The heart disease rate is also higher among African American females (193.5) compared to white females (188.4). However, the leading cause of death for African American non-Hispanic males is cancer (310.1). African American non-Hispanic males has a higher cancer rate compared to white males (242.1). According the Centers for Disease Control and Prevention, African American men are at a higher risk of getting prostate cancer. Despite higher rates of screening for African American men in North Carolina, the rate of cancer and death are higher compared to white males.

*Please refer to Appendix M*

#### Infant and Fetal Mortality

The 2010 Community Health Assessment last reported the infant mortality rate at 6.6 in 2009. Since that time, the infant mortality rate has fluctuated to a low of 5.7 in 2011 to as high as 7.7 in 2012. In comparison, the infant mortality rate for North Carolina has been higher than Johnston County's rate except for the year 2012. In 2013, Johnston County had a total of 13 infant deaths with the majority among the white non-Hispanic population. A number of those deaths were due to sudden infant death syndrome. In recent years, awareness regarding sudden infant death syndrome has increased. As a way to continue to promote back to sleep and other measures in preventing SIDS, safe sleep education is provided to maternity patients receiving services at Johnston County Public Health Department and other maternity and pediatric practices.

The fetal mortality rate for Johnston County was 3.7 in 2009. The highest fetal mortality rate was 9.7 in 2010 and the lowest was 3.1 in 2012. Johnston County fetal mortality rate was lower than the state for all years with the exception of 2010. Some of the contributing factors for high fetal deaths are lack of prenatal care, smoking, and alcohol

consumption. In recent years, there have been social media campaigns and a focus on encouraging folic acid supplements which has been shown to decrease certain birth defects. As part of the care it provides for women, Johnston County Public Health Department provides multivitamins which contains the recommended amount of folic acid for women of childbearing age.

*Please refer to Appendix N-O*

## **Morbidity**

### **Communicable Diseases**

Gonorrhea is a sexually transmitted disease (STD) that can infect both men and women. It is a common infection especially among young people ages 15-24 years. During the years of 2006-2010, there were 784 cases of gonorrhea in Johnston County. The African American, non-Hispanic population represented the majority at 534 cases. The White, non-Hispanic population accounted for 209 cases while there were 34 cases of gonorrhea in the Hispanic population.

When compared to our peer counties Johnston county ranks 4<sup>th</sup> in NC resident gonorrhea cases per 100,000. Union, Wayne and Wilson counties all had more gonorrhea cases than Johnston county from 2006-2010. Randolph reported the smallest number of cases at 337 during that time. Wilson County had the majority of the cases from 2006-2010 with 1,771 cases and the highest rate of 439.1 which is higher than North Carolina's rate of 168.9.

Primary syphilis and secondary syphilis cases in Johnston County from 2006-2010 totaled 18. Again, the African American non-Hispanic population had the majority of the cases with 11, while White non-Hispanic population had 6 cases. The Hispanic population accounted for only 1 case of syphilis. Genital sores caused by syphilis make it easier to transmit and acquire Human Immunodeficiency Virus (HIV) infection sexually. In Johnston County, from 2009-2013, 66 new HIV cases and 55 new AIDS cases were reported. Forty-three individuals in Johnston County had been diagnosed in 2008 with AIDS, the highest number diagnosed in one year. Eighteen new cases of HIV were diagnosed in 2013, which is the highest number of confirmed cases in one year from 2009-2013. As of 12/13/13 there are 312 people living with HIV or AIDS in Johnston county. Although, there is no cure for HIV or AIDS, early diagnosis is important in order to prevent the spread of the virus.

In comparison to our peer counties, Randolph County has continued to have the lowest HIV cases from 2009-2013. There was an increase in cases for Union County from

2012 (11) to 2013 (22). Wilson county is the only county whose HIV cases have decreased from 2012 (20) to 2013 (9) while Randolph County remained the same from 2012 to 2013.

Chlamydia is a common STD that is spread by having vaginal, anal or oral sex with someone who has Chlamydia. Chlamydia can infect both men and women. Chlamydia can be cured with treatment with prescription medication. In 2013, 550 individuals were diagnosed with Chlamydia infection. The infection rates of Chlamydia in Johnston County continue to rise. The number of individuals infected has dropped once during 2009-2013. The decrease in infection was from 2011-2012. In 2011, there were 545 people diagnosed with Chlamydia and a slight decrease was noted in 2012 with 464 people diagnosed.

In comparing Johnston County's peer counties, Wayne County has had the highest number of Chlamydia reports from January to December from 2009-2013 with the exception of 2010. In 2010, Wilson County had the most Chlamydia cases at 1,122. Annually, Johnston County has seen 400-550 reports of Chlamydia. Randolph County has had the least number of reports consistently between 2009-2013.

*Please refer to Appendix P-S*

(Reference 16, 17, 18)

## **Tuberculosis (TB)**

Tuberculosis (TB) is caused by a bacterium that usually attacks the lungs. The bacterium can attack any part of the body such as the kidney, spine and brain. If TB is not treated appropriately it can be deadly. TB is spread through the air from one person to another. When a person who has the TB disease of the lungs or throat coughs, sneezes, speaks or sings it is possible for people who are near by to inhale these bacteria and become infected. TB bacteria can live in your body without making you sick which is called latent TB infection. In this case, and in most cases, people who breathe in TB bacteria become infected but their body is able to stop the bacteria from growing. If your immune system is compromised and cannot prevent the TB bacteria from growing and the bacteria becomes active thus creating TB disease.

The TB symptoms includes: a bad cough that last 3 weeks or longer, pain in the chest, coughing up blood or sputum, weakness or fatigue, weight loss, no appetite chills fever and sweating at night. Two tests are available to detect TB bacteria in the body. The TB skin test (TST) and TB blood tests can be given by a medical provider or local health department. The TB disease is treatable by taking medications for 6-9 months as prescribed. If the medication is not taken correctly it is possible for the bacteria to become resistant to the drug which creates TB that is harder and more expensive to treat.



In North Carolina from 2009-2013 the Black/African American had the majority of the cases over the years. In Johnston County from, 2010-2014 there have been a total of 19 confirmed cases of TB. During 2013 and 2014, Johnston County has seen higher numbers of TB when compared to earlier years. Generally speaking, people who are at high risk for developing TB are those who have been recently infected with the TB bacteria and those with medical conditions that weaken the immune system.

*Please refer to Appendix T-U*

(Reference 19, 20)

### **Pertussis (Whooping Cough)**

Pertussis is a respiratory illness commonly known as whooping cough and is extremely contagious. The bacteria attach to the cilia (tiny, hair-like extensions) that line part of the upper respiratory system. Once the bacteria have attached to the cilia they begin to release toxins, which leads to damage to the cilia, subsequently causing inflammation (swelling) (). Infants, children and adults can all be impacted by pertussis. Pertussis can be life threatening for infants. Typically the symptoms start with cold-like symptoms and a mild cough or fever, then after 1 to 2 weeks, severe coughing can begin. Pertussis can evolve into a series of coughing fits that persist for weeks.

There are several formulations of the vaccine available to prevent pertussis. The vaccination of pregnant women and families with Tdap is especially important to help protect infants. Pertussis is generally treated with antibiotics, which are used to control the symptoms and to prevent infected people from spreading the disease. In Johnston County from 2010-2014, there have been a total of 59 cases of pertussis.

*Please refer to Appendix V*

(Reference 21)

### **Cancer**

In 2014 it is projected that in North Carolina there will be 57,298 new cases of lung/bronchus, female breast, prostate and colon/rectum cancers. Of those new cases 922 are projected for Johnston County. The majority of the cancer cases in 2014 will be attributed to female breast (160), lung/bronchus (135) and prostate (134). It is projected that of our peer counties, Union County will have the most female breast cancer new

cases during 2014 at 185. Wilson County is projected to have the least amount of new cancer cases overall at 508 in 2014.

From 2006-2010 the cancer incident rates per 100,000 population which are age adjusted reflect that the highest number of cases were female breast cancer (612). The lowest number of incident cases from 2006-2010 for Johnston County is colon/rectum cancer (329). The 2006-2010 female breast cancer incident rate of 147 for Johnston County (as compared to NC rate of 155.9) is highest when compared to prostate, lung/brochus and colon/rectum. The all cancer rate for 2006-2010 in Johnston County was 496 (NC rate 498.1) and in 2007-2011 it was 499.7 (NC rate 496.7) indicating a slight increase for Johnston County.

*Please refer to Appendix W-AA*

(Reference 2)

## **Health Care**

### **Inpatient Hospital Utilization (Discharges, Admissions and Charges)**

Rising health care costs make it important to understand the reasons that people seek emergency room care rather than less expensive outpatient or office based care. Community Health Assessment Surveys of 2014 show that most often when adults are sick they go to a doctor's office or Health Department. The majority of survey respondents (28%) had other private health insurance purchased from an employer or workplace while 17% of respondents had no health plan of any kind. Of the 17% of respondents with no health plan of any kind, 87% were Spanish speaking. Twenty-two percent of the survey respondent adults had problems getting the health care they needed for themselves personally or for a family member from any type of health care provider, dentist, pharmacy or other facility. The majority of the respondents also identified dental care as the type of facility or provider that they or a family member had trouble getting healthcare from. Uninsured adults are more likely than those with private health insurance or a public health plan to visit the emergency room.

Although many residents use the emergency room for care, Johnston County's inpatient hospital utilization total cases have remained almost steady over the past 3 years. The cardiovascular and circulatory disease total cases declined from 3,114 in 2010 to 2,902. In 2012, other diagnoses including those related to mental health also declined from 1,495 in 2010 to 1,233. There has been a constant increase in the total cases of injuries and poisoning in Johnston County. In 2010, there were 1,284 total cases of injuries and poisoning; the number increased in 2011 (1,291), and was slightly higher in 2012 at 1,356.

Johnston Health, the local hospital system, released data that speaks to the patient characteristics of the short term acute discharges. In every year from 2008-2012, the group who utilized the hospital the most was the 18-44 age group. In 2012, the Caucasian race accounted for 69.7% of the population seen while African Americans represented 21.7%. The Hispanic ethnicity represented 7.4% (718) in 2012, 7.5% (757) in 2011 and 7.5% (727) in 2010. The general hospital discharges in 2008 (17,130) continued to decrease over the years to 16,396 in 2012. Excluding normal newborns, average patient charges in 2012 was \$21,726 down from \$22,361 in 2011. In comparison, the charges were \$16,730 in 2008. The average length of stay excluding normal newborns in 2012 was 3.9 days down from 4.6 days in 2008.

*Please refer to Appendix BB*

### **Health Care Facilities and Providers**

The number of health care facilities and providers directly impacts access to care. The Affordable Care Act is one resource that Johnston County residents can use in order to acquire health insurance. In Johnston County in 2014, approximately 5,500 people enrolled in health care coverage via Healthcare.gov. Having health insurance can reduce the number of patients that skip or delay their care because of gaps in health insurance.

In addition to having the access to facilities, the number of health professionals affects access to care. The overall number of primary care physicians has decreased slightly from 2009 to 2012. The number of internal medicine physicians has decreased by almost 50% from 2009 (22) to 2012 (12). The number of physicians per 10,000 population on average has been 7.45 for four years. Although, the number of primary care physicians per 10,000 has declined from 2009 to 2012, the number of dental hygienist has increased by 30%-31% from 75 to 98. The number of nursing facility beds has also increased from 550 in 2009 to 555 in 2012.

Safety net providers in the community are committed to filling the gaps for those with limited or no insurance coverage. Project Access of Johnston and Harnett Counties, Benson Area Medical Center, CommWell Health, Johnston County Health Department and Johnston Health collaborate with other community providers to provide services to this population. As part of this commitment, Johnston County Health Department expanded its staffing in 2013 to include a Behavioral Health Division.

*Please refer to Appendix CC*

## **Mental Health**

The number of Johnston County residents served by psychiatric hospitals was at its all-time high at 93 in 2010. From that time the number of residents served in psychiatric hospitals has decreased to its lowest at 62. For North Carolina the number of those served is drastically higher than Johnston County. In contrast, the number of persons served in alcohol and drug abuse treatment centers in Johnston County has greatly increased. In 2010, there were 26 Johnston County residents served in treatment centers which increased to 61 in 2013. The data suggests there is a great need to address substance abuse in Johnston County. One major concern is the increase in meth labs in Johnston County. According to the 2013 Johnston County State of the County Health Report, there were 15 meth labs in 2012 and 22 in 2013.

*Please refer to Appendix DD-EE*

(Reference 23)

## **Maternal and Child Health**

Teen pregnancy and childbearing bring substantial social and economic cost through immediate and long-term impacts on teen parents and their children. Pregnancy and births are significant contributors to high school drop out rates among girls. It's important to educate the teens about sexual issues, HIV and STDs and pregnancy to include methods of prevention. In Johnston County youth access to evidence-based and evidence-informed program to prevent teen pregnancy are available. By offering linkages to teen pregnancy prevention programs and educating stakeholders about strategies to reduce teen pregnancy an impact on teen pregnancy can be made. In 2007-2011 the rate per 1,000 population for girls 15-17, in African American non-Hispanics was 33.7 and the rate of the Hispanic pregnancies was 66.4 (white non-Hispanic rate was 19.4). There was a decrease in 2008-2012, as the rate of pregnancy per 1,000 population for girls 15-17 who were African American non-Hispanic was 32.6 and the rate of Hispanic pregnancies was 58.5. The white non-Hispanic rate was 18.0.

In Johnston County, pregnancy rates per 1,000 population in females 15-19 has decreased from 2010-2012. In 2010 the rate was 49.9, while in 2011 the rate was 49.2 and then decreased to 41.4 in 2012. In comparison, Union County has repeatedly had the lowest pregnancy rates per 1,000 population of females 15-19 during 2010-2012. The total pregnancies per 1,000 population in females 15-19 averaged 279 from 2010-2011 with a decrease in 2012 to 234. In Johnston County, the total abortions per 1,000 population decreased from 2010 -2012.

A short interval birth is the amount of time between pregnancies. Women with short birth intervals are at nutritional risk and more likely to experience adverse birth outcomes.

These risk factors, teen pregnancy and short interval births, can be modified with family planning education. By providing family planning education, the number of unplanned or unintended pregnancies can be reduced. Family planning education can include information regarding abstinence, consequences of not being abstinent, birth control options, natural methods and ineffective methods. Offering family planning allows families to attain their desired number of children, determine the spacing of pregnancies and promotes informed choices about sexual and reproductive health. Other benefits of family planning include preventing pregnancy-related health risks in women, reducing infant mortality, helping to prevent HIV/AIDS, reducing adolescent pregnancies, slowing population growth.

Cesarean section or c-section is the surgical procedure where a baby is delivered through a surgical incision in the mother's abdomen and uterus. C-sections can be planned or unplanned surgical procedures. In North Carolina from 2008-2012, there were 192, 712 (31%) births by c-section. In Johnston County from 2008-2012, 3,741 (32%) of births were by cesarean section. During 2009-2013, in Johnston County 3,575 births were by cesarean section which reflects 31.5%. State efforts have focused on reducing the C-section deliveries among low risk pregnancies. The Perinatal Quality Collaborative of North Carolina (PQCNC)'s, Eliminating Elective Deliveries Under 39 Weeks Gestation initiative aims to decrease C-Sections between 36—38 weeks gestation that are not medically necessary among first time mothers ().

When compared to peer counties, Union and Johnston Counties had the highest number of births delivered by c-section. Wilson and Wayne Counties had the lowest number of NC resident births delivered by c-section. Davidson County, with 35% of births delivered by c-section, was the highest. Wayne County with 32.3% had the second highest percent of births delivered by c-section. Wilson County (26.9%) and Craven County (29.5%) had the lowest percent of births delivered by c-section. Based on five year adjusted rates 2005-2009, the County's fetal death rate was 6.1% vs. the State's rate of 8.3% (2006-2010 Community Health Assessment p. 21).

*Please refer to Appendix FF-MM*

(Reference 23, 24, 25, 26)

### **Prenatal Care Patterns include smoking behavior**

Information regarding smoking during pregnancy and after pregnancy was gathered from the North Carolina Pregnancy Risk Assessment Monitoring System Survey

Results. Those results are reported either by all of North Carolina or by regions. For this set of data Johnston County is a part of Region Four.

Smoking during pregnancy is a high risk behavior. Smoking can increase a woman's risk for a miscarriage and cause complications with the placenta. After pregnancy smoking can increase the risk for Sudden Infant Death Syndrome (SIDS). Approximately, 8.6% of women in Region Four reported smoking during the last 3 months of pregnancy from 2006-2008. The highest percent of smokers were black (14.5%). Throughout 2006-2008, 11.9% of women reported smoking after the pregnancy. From 2006-2008, in the last three months of their pregnancy, 1.9% of women smoked 20 or more cigarettes per day, .3% of women smoked 10 to 19 cigarettes, 6.7% smoked 1 to 9 cigarettes and 91.1% of women smoked no cigarettes.

There are many benefits to quitting smoking. These include more oxygen delivered to the baby, and decreased risk of developing heart disease, stroke, lung cancer, chronic lung disease and other smoke related diseases. For support in quitting, including free quit coaching, a free quit plan, free educational material and referrals to local resources please call 1-800-QUIT-NOW (1-800-784-8669); TTY 1-800-332-8615.

(Reference 27)

## **Low Birth Weight**

Low birth weight is less than or equal to 2500 grams (5 pounds, 8 ounces) and very low birth weight is less than or equal to 1500 grams (3 pounds, 5 ounces) per the State Center for Health Statistics. Some low birth weight babies are healthy, even though they are small. But being low birth weight can cause serious health problems for some babies. There are two causes that account for the majority of low birth weight babies. The causes are premature birth or birth before 37 weeks and fetal growth restriction. Fetal growth restriction means the baby doesn't gain the needed weight before birth. Both premature birth and fetal growth restriction can be caused by numerous other conditions. Conditions such as birth defects, infections, preterm labor, chronic health conditions, problems with the placenta, not gaining enough weight during pregnancy and having a low birth baby in a previous pregnancy are risk factors for a low birth weight baby. Other risk factors that could cause a low birth weight baby are smoking, drinking alcohol, using street drugs and abusing prescription drugs. Biological factors that are risk factors for a low birth weight baby are being younger than 17 or older than 35 years old.

When a baby is born with low birth weight there are some medical conditions that can be more common. The medical conditions could include respiratory distress syndrome, bleeding of the brain, patent ductus arteriosus, necrotizing enterocolitis and retinopathy of prematurity. A low birth weight baby is at a higher risk to develop diabetes, heart disease, high blood pressure, metabolic syndrome or obesity later in life. It is important for parents of low birth weight children to work closely with their medical teams to

ensure that their child is as healthy as possible, including providing proper nutrition and physical activity in order to promote healthy growth.

In North Carolina there were a total of 56,086 low and very low birth weight births from 2008-2012 while in 2009-2013 there were 54,666. In Johnston County from 2008-2012, 894 low birth weight babies were born and 178 very low birth weight babies were born. In 2009-2013, 861 low birth weight and 169 very low birth weight babies were born (). Of those births in 2008-2012, 14.1% were non-Hispanic black and from 2009-2013, 13.7% of the births were non-Hispanic black. This group had the highest percentage for both time periods, indicating a disparity for non-Hispanic blacks.

(Reference 28, 29)

### **Infant care practices including breastfeeding rates**

Breast milk is the only food that is perfect for babies. Breastfeeding gives babies a wide range of nutrients, vitamins, antibodies, fat and protection that can only come from breast milk. Breastfed babies have a lower risk of asthma or allergies. Babies who are exclusively breastfed for the first 6 months, without any formula, have fewer ear infections, respiratory illnesses, and bouts of diarrhea (). Breastfeeding has been linked to higher IQ scores and babies are more likely to gain the right amount of weight. Breastfeeding also benefits the mom's health by burning extra calories which can help mothers lose pregnancy weight faster and it reduces bleeding by helping the uterus return to pre-pregnancy size.

From 2005-2009, the percent of North Carolina women who breastfed for any length of time continued to increase, from 65.7% to 71.5%. In 2010, there was a small decrease in the percent of North Carolina women who breastfed for any length of time to 71.1%. North Carolina mothers were asked did his/her doctors or health providers give you any help or encouragement for breastfeeding. According to the survey, at least 70% or higher confirmed they received help from medical providers. The highest percentage of help was given in 2010, at 75.7% by medical providers or doctors.

*Please refer to Appendix NN*

(Reference 30, 31, 32)

### **Child Health**

Johnston County's 0-19 year olds estimated 2013 population is 29.4% or 52,347 children. In 2010 and 2011, 61% of Johnston County's Medicaid-eligible children received dental services. Here in North Carolina 57% of Medicaid eligible children received services in 2010 and 58% in 2011. Statistics from 2006-2010 regarding asthma hospital discharges for children ages 0-14 years old, illustrate 2009 with the

highest number of discharges in Johnston County at 64 children. The rate of discharges from 2006 to 2009 rose slightly, while dropping in 2010 to 56.

Poverty affects children's health not only when they are young, but also later in their lives. Family income is a key determinate of healthy child development. In 2012, 11,771 children were living at or below the poverty level in Johnston County. There has been an increase in the percent of children who are enrolled in Medicaid receiving preventive care in Johnston County. In 2011, 59.5% of children in enrolled received preventive care while in 2012, 62.9% received at least one health check screening.

Children are tested for lead poisoning at age starting at age one. The effects of lead poisoning include learning and behavior problems, brain damage, hair loss, anemia, seizures, coma and death. Lead can be found in lead paint, typically found in homes built before 1978. In addition, plastic or vinyl mini-blinds, water, soil, toys or workplaces may have lead. In 2009, of the 3,125 children tested, there were 2 confirmed cases in Johnston County. The number of children tested represents 19.4% of children under the age of six.

*Please refer to Appendix OO*

## **Tobacco Exposure**

Over the years, the number of tobacco farmers has decreased along with the number of residents who smoke. In 2010 only 19.7% of Johnston County residents reported being a current smoker. Of those who reported being current smokers, 22.4% of them were white while the other population groups represented only 11.8%. The 2010 current smokers who had high school education or less represented 25.7% while those with some college represented 11.4%. In 2010, 98.4% of Johnston County residents reported not currently using chewing tobacco, snuff or snus which is slightly higher than the 96% of total respondents from North Carolina. During the year of 2010, 15.5% of the Johnston County population reported smoking everyday and 4.2% reported smoking some days. The majority of the population reported being former smoker at 21% and never smoked 59.2% in 2010. Due to changes in the weighting methodology and other factors, results from 2013 are not comparable to 2010 and earlier years. The Behavioral Risk Factor Surveillance System (BRFSS) is a random telephone survey developed by the Centers for Disease Control and Prevention (CDC) in collaboration with state health departments and is currently conducted in all 50 states, the District of Columbia and several United States territories.

The 2014 Community Health Assessment survey conducted by the Johnston County Public Health Department and partnering agencies showed 223 respondents were not current smokers and 26 respondents were currently smoking. The trend is that the majority of the population is composed of non smokers in Johnston County, NC. The majority of the 26 smokers were English speaking representing 73%. During the assessment 50% of respondents had been exposed to secondhand smoke. The



majority of the secondhand smoke exposures took place in homes or at workplaces. Of those 26 survey participants who were currently smoking 23% were familiar with the North Carolina Quitline and 17% would depend on a doctor as a resource for getting help if they wanted to quit smoking.

North Carolina's Smoke-Free Restaurants and Bars Law was passed by the N.C. General Assembly and signed by the Governor in May, 2009, and became effective January 2, 2010. The law prohibits smoking in enclosed restaurants, bars and most lodging facilities (except for some designated guest smoking rooms). Smoking is also banned in enclosed areas of hotels, motels and inns, if food and drink are prepared there.

(Reference 33)

## **Determinants of Health**

### **Social environment**

#### Education

According to the US Census Bureau educational attainment data from 2009-2013, Johnston County had a slightly higher percentage of students graduating high school compared to the state by 2.8%. The percent of adults receiving some college with no degree (22.1) is higher than those who have an associates (10.9) or bachelor's degree (15.3) in Johnston County. Several factors can contributed to a higher percent of adults not completing college such as finances, transportation, and child care.

Over the past five years the dropout rate for both Johnston County and the State has gradually decreased. However, Johnston County rate for the 2012-2013 academic year was lower than the state. In 2012-2013 the dropout rate was 1.95 for Johnston County which is a drastic decrease from the 2008-2009 rate of 4.58. In addition, Johnston County had a lower rate compared to the following surrounding peer counties for the 2012-2013 academic year: Harnett (3.85), Wayne (4), and Wilson (3.4). For the 2012-2013 school year there was a total of 189 students who dropped out. There were more male (121) than female (68) drop outs and a higher number of white students (93) than any other race or ethnicity. Clayton High School had the highest number of students drop out for the 2012-2013 school year. In 2010, the average SAT score in Johnston County (1022) was higher than the State (1008). However, the average SAT score was the same for both Johnston County and North Carolina in 2013.

One factor that may have contributed to the gradual decrease in the drop rate is the decrease in teen pregnancies in Johnston County. Teen pregnancy can greatly affect

the level of educational attainment due to factors such as finances and child care. The Adolescent Parenting Program at the Department of Social Services in Johnston County has helped to address the drop out rate. The program assists teen parents with improving child welfare and school readiness for their children and increasing graduation from high school.

*Please refer to Appendix PP-SS*

(Reference 30, 31, 32)

## Crime

There are several offenses that are reported by law enforcement agencies such as murder, rape, robbery, aggravated assault, burglary, larceny, and motor vehicle theft. In 2013, Johnston County had a total 3,810 reportable offenses from law enforcement agencies. There was a decrease in the number of offenses from 2012 to 2013 by 756. Of all the offenses reported, larceny (2,297) crimes were the highest in Johnston County followed by burglary (1,081). In comparison, North Carolina's total of larceny offenses in 2013 was at 198,893. Although, North Carolina's crime index is higher than Johnston County from 2009 to 2013 the rate has gradually decreased. Johnston County Sheriff's Department had the highest reported offenses from 2010-2013 as a result of servicing the entire county. One contributing factor that may have influence on crime in Johnston County is the dropout rate. According to the NC Department of Public Instruction, attendance is the top reason that many students dropout of school. Therefore, students may not receive a high school diploma which may result in less employment opportunities and an increase in risky behaviors which may include criminal acts.

*Please refer to Appendix TT-UU*

## Financial and Economic

### Income and Poverty Levels

According to the US Census Bureau, the majority of Johnston County residents had a household income of \$50,000-\$74,999. This percent is slightly higher than the state by 1.1%. In 2013, the percent of Johnston County residents estimated to be below poverty level over the previous twelve months was at 16.8 compared to the state (17.9). However, Johnston County poverty percent was not the highest or the lowest compared to the peer counties. In 2013, the poverty percent was the highest for Wayne County (21.4) and the lowest for Union County (9.7). Based on the 2010 Community Health Assessment there has been an increase in the percent of Johnston County residents

with incomes below poverty level by 4%. However, the percent is based on a 2000 estimate from the NC Rural Economic Development Center.

*Please refer to Appendix VV-XX*

## Financial Assistance

The increase of residents living below the poverty level lead to the need for public assistance and increased Medicaid services. The number of Johnston residents eligible for Medicaid increased by 1,136 in December from 2011 to 2013. There has been a major increase since the last Community Health Assessment which reports the number of Medicaid eligible was at 27,620 in 2009. Most often Medicaid recipients are also receiving some type of food and nutrition services. The number of residents participating in the food and nutrition services programs in January 2011 was at 27,570. In January 2013, those served increased to 34,235.

*Please refer to Appendix YY*

(Reference 35)

## Unemployment Rates

The 2010 Community Health Assessment reports the unemployment rate at 9.5% in September 2009. The unemployment rate has gradually decreased with the most current rate at 4.6% as of December 2014. Currently, Johnston County unemployment rate is less than the state by 0.6%. In addition, the December 2014 preliminary data revealed that Johnston County labor force was at 82,941. Of the peer counties selected for comparison, Wilson County has the highest unemployment rate and the lowest is Union County. Although, Johnston County's top five employers are: Johnston County Schools, Grifols, Johnston Memorial hospital, County of Johnston, and Asplundh Tree Expert Company there are many residents that seek employment in the triangle area which includes Raleigh, Durham, and Chapel Hill. The unemployment rate may continue to decline with new employment opportunities such as those offered by pharmaceutical company Grifols. Grifols recently opened a new facility in the town of Clayton that will have 200 employees.

*Please refer to Appendix DDD*

(Reference 36)

## Transportation

Transportation is a major concern in Johnston County particularly with accessing health care. According to the US Census Bureau, 4.6% of households did not have a vehicle for transportation compared to the state (6.6%). Many residents who qualify utilize Johnston County Area Transit System (JCATS), the only public transportation available to assist them with access to health care and other services. JCATS has 33 buses and vans that are accommodating to individuals with special needs. Several human service agencies have contracts with Johnston County Area Transit System particularly for Johnston County residents with Medicaid or senior citizens over 60 years of age. The general public can also utilize JCATS services; however, availability is limited at this point due to funding.

(Reference 37)

## Individual Behavior

### Obesity, Physical Activity, and Nutrition

Obesity is still a major issue of concern in Johnston County. According to the County Health Rankings, 33% of Johnston County residents are obese compared to the overall percent in North Carolina (29%). In comparison the adult obesity percentage was highest in Wilson County (35) and lowest in Union County (27) for the peer counties. Research has shown that physical activity and nutrition play an integral role in reducing adult obesity. Johnston County had 28% of physical inactivity which is higher than the state (25%). In comparing physical inactivity with the peer counties the highest percent was in Wilson County (31) and lowest Union County (21). It is evident that there is a correlation between physical inactivity and obesity based on the data. According to the 2010 Community Health Assessment adult obesity was at 27.1%. Adult obesity has increased by 5.9% in Johnston County. Nutrition is another important factor that contributes to obesity. According to the 2011 Behavior Risk Factor Surveillance System, the percent of residents that consumed five or more servings of fruits and vegetables or beans per day was 16.5 compared to North Carolina 13.7. Obesity can contribute to other chronic health conditions such as diabetes and heart disease.

*Please refer to Appendix ZZ, AAA, BBB, and CCC*

## Health Screenings

According to the 2010 Behavioral Risk Factor Surveillance System, 74.8% of Johnston County residents received mammogram screenings which is higher than North Carolina (67.4%). Mammogram screenings are recommended beginning at the age of 40; however, if there is a family history of breast cancer the screening should be done earlier or at the discretion of a health care provider. The percent of Johnston County population who had a sigmoidoscopy or colonoscopy screening was 67.6% which is slightly lower than the state at 69.6%. Beginning at the age of 50 it is recommended that people should get colorectal screenings. The percent of Johnston County male population that received a Prostate Specific Antigen Test to screen for prostate cancer was at 68.1% compared to the state (66.9%). According to the CDC, the following men are at a higher risk of getting prostate cancer: African American, 50 years old or older, or has a family history usually father, brother, or son.

*Please refer to Appendix FFF-HHH*

(Reference 38)

## Motor Vehicle Injuries

From 2010-2013, the total number of reportable crashes in Johnston County was at 14,141. Of those reported, 106 were fatal, 4,550 were non-fatal injuries, 9,485 were property damage only, and 862 involved alcohol. There were 10,109 rural crashes reported; however, of the towns reporting crashes Smithfield had the highest at 1,521. Johnston County residents reporting that they always used seat belts while driving or riding a car in the Wake AHEC area increased from 91.7% in 2011 to 94.7% in 2013. Wake AHEC services the following counties: Durham, Franklin, Granville, Johnston, Lee, Person, Vance, Wake, and Warren. Johnston County percent of seat belt use was higher than North Carolina (93.3%) in 2013. The 2010 Community Health Assessment reported Johnston County ranking as fifteenth with 1,559 injury crashes and second with 33 fatalities from 2005-2009. Over the past few years there have been several efforts to address teen motor vehicle deaths. The Teen Driving Committee has been integral in addressing and reducing the teen driving deaths in Johnston County.

*Please refer to Appendix EEE, III, and JJJ*

## Family Planning

The North Carolina “Be Smart” program has been an essential part of helping women and men in Johnston County receive family planning and reproductive health services as a way to reduce unplanned pregnancy. The “Be Smart” program is especially important for people who are uninsured. The “Be Smart” program has contributed to the decreasing the number of teen pregnancies since 2010 which reported 10 live births for the 10-14 age group and 215 for the 15-19 age group. In 2013, there were 2 live births among the 10-14 age group and 179 in the 15-19 age group. The number of live births in Johnston County was drastically lower than the state which reported 128 births among the 10-14 and 9,017 among the 15-19. The highest number of live births and induced abortions were among white non-Hispanic teens between the ages of 15-19 from 2010 to 2013. Johnston County has had a higher fertility (38.5) and pregnancy rate (47.4) than North Carolina during the 2009-2013 period.

*Please refer to Appendix KKK-NNN*

## Physical Environment

There are several parks and recreational facilities that can be utilized for physical activity in Johnston County. The Johnston County Visitor’s Bureau and Johnston County Sports Council established a partnership to develop the Johnston County Parks and Recreation Master Plan. The Master Plan has identified parks and recreational facilities that have amenities such as walking trails, playgrounds, sport related area (i.e. basketball, volley, tennis courts), and greenways that can be utilized by Johnston County residents. The master plan identified 43 parks and/or recreational facilities in the county. According to the Master Plan there is great need for parks in Western Johnston County and in the Archer Lodge vicinity.

(Reference 39)

## Prevention and Health Promotion

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Johnston County has been strategic in planning to address health priorities. The last Community Health Assessment was completed in 2010. Thus in 2011-2013, a State of the County Health Report was completed. During that time our priority health issues were obesity, diabetes, access to healthcare, cancer and injury prevention (especially teen motor vehicular deaths). Interventions were implemented to address obesity which included the initiation of a walking trail and construction to increase the safe conditions of paved sidewalks. To improve obesity rates, a farmer's market was opened in Smithfield and elementary schools began community gardens. To address diabetes, the implementation of a Diabetes Education Recognition Program (DERP) through the Johnston County Public Health Department was established and Johnston Health offered diabetic education programs. There have been opportunities for glucose screenings offered both at on-site health fairs and local community events. There was a collaborative effort during that time between Project Access, the HealthNet Committee and the Johnston County Public Health Department to serve patients who were uninsured and underinsured in Johnston County.

To address the cancer rates, the county had two grant programs that were well utilized by our residents - NC Breast and Cervical Cancer Control Program and Susan G. Komen for the Cure NC Triangle Affiliate Grant. There were also breast cancer screening referrals from Project Access and additional screenings provided by the YWCA Encore Plus Program. These grants and programs served to increase awareness and the number of women receiving breast cancer screenings.

The Healthy North Carolina 2020 objective is to reduce motor vehicle crash-related deaths for all age groups, but the incidence of teen deaths from vehicle accidents in Johnston County was significant enough to develop targeted interventions for teens. The interventions included: Teen Driving Safety Committee's peer to peer education, Safekids of Johnston County's promotion of education, Johnston County School's Driver Education Course requirements and Enhanced Safety Check Points.

New opportunities for improvement included the Johnston County Health Department serving as lead agency in the Community Transformation Grant (CTG) activities for Region 7. The CTG grant increased availability of farmer markets and tobacco cessation policies and signage. Additionally, the Annual Walk for Health was held and more community gardens were started. The Living Healthy with Diabetes program was also implemented.

To address our goal of providing medical care to the uninsured, Johnston County took the additional steps to expand OB/GYN services to the community through additional satellite sites of CommWell Health, a non-profit Federally Qualified Health Center. Benson Area Medical center also piloted a program to assist the uninsured in obtaining

primary care services. The expanding efforts continued with a new partnership with Rex mobile to provide breast cancer screening to uninsured and low income women.

In 2013, Community Transformation Grant Project continued to encourage joint use agreements to address physical activity and partnered with the town of Archer Lodge on their comprehensive plan while continuing to support healthy eating through community gardens. Johnston Health's HealthQuest Silver Sneakers Program in addition to a community walking event continued to support the increase in physical activity.

To enhance access to medical care, the Johnston County Public Health Department through the Community Transformation Grant Project, focused on providing community resources to patients related to their chronic disease self-management, weight management and tobacco cessation to improve their overall health.

All of these health promotion efforts have provided Johnston County with new opportunities for Johnston County residents. There have been some great success in Johnston County and the proof is in the improving of health outcomes and healthy behaviors. Continued environmental and health related policy changes will allow for individuals to take more responsibility for their health. Although Johnston County has not reached the Healthy People 2020 goals, the collaboration of community partners and work of individual residents makes the task more attainable.

All information was gathered from 2011-2013 Johnston County State of County Health (SOTCH) Reports.



## Summary and Next Steps

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After presentation of this information to the Board of Health, the Community Health Assessment Committee, and community groups, the top three priority areas to be addressed over the next four years are: access to care (medical and behavioral, obesity and overweight, and physical activity and nutrition. Other areas of concerns are access to substance abuse services and dental care. The at-risk populations are the underinsured and uninsured as this leads to access to care challenges and minorities, including the African American and Latino population. The Hispanic population continues to increase and is the largest minority population in our public school system.

The next steps include continuing health promotion efforts through the development of action plans. These strategic plans will be created to determine how Johnston County Health Department and its partners will address the priority areas selected for 2014-2018. Johnston County will strive to reach Healthy People 2020 objectives and goals. In order to be effective, those goals will be broken into more manageable tasks that can be completed annually or by 2018.

We want to thank all of those who participated to make this document a success.

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## Appendix

## Appendix A-The First Appendix

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	April 1, 2010		Population Estimate (as of July 1)			
	Census	Estimate Base	2010	2011	2012	2013
Johnston County, NC	168,878	168,878	169,613	172,747	174,801	177,967

Chart Source: US Census, American FactFinder, Annual Estimates of Resident Population: April 1, 2010 to July 1, 2013. Retrieved on January 02, 2015 from <http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF>

## Appendix B-The Second Appendix

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<b>2013 Johnston County Hispanic or Latino Population</b>		
	Number	Percent
Total Population	177,967	
Hispanic or Latino (of any race)	23,469	13.2%
Mexican	15,501	8.7%
Puerto Rican	2,960	1.7%
Cuban	0	0.0%
Other Hispanic or Latino	5,008	2.8%

Chart Source: US Census, 2013 American Community Survey 1-Year Estimates.  
Retrieved January 2, 2015 from  
[http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_13\\_1YR\\_DP05&prodType=table](http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_DP05&prodType=table)

## Appendix C-The Third Appendix

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<b>2013 Population Estimates</b>		
<b>Race</b>	<b>Johnston County</b>	<b>North Carolina</b>
White	80.5%	71.7%
African American	15.9%	22.0%
American Indian and Alaska Native	0.9%	1.6%
Asian	0.7%	2.6%
Two or more races	1.8%	2.0%
Hispanic or Latino Origin	13.2%	8.9%

Chart Source: US Census, 2013 American Community Survey 1-Year Estimates.  
Retrieved January 2, 2015 from  
[http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_13\\_1YR\\_DP05&prodType=table](http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_DP05&prodType=table)

## Appendix D-The Fourth Appendix

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### 2013 Estimates of Youth Population 0-19 years old

Children	0 – 4 years	12,120
	5 – 9 years	13,650
Adolescents	10 – 14 years	14,147
	15 – 19 years	12,457

Chart Source: US Census, 2013 American Community Survey 1-Year Estimates.  
Retrieved January 2, 2015 from  
[http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_13\\_1YR\\_DP05&prodType=table](http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_DP05&prodType=table)



## Appendix E-The Fifth Appendix

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	<b><u>Johnston</u></b>	
	<b><u>Number</u></b>	<b><u>Percent</u></b>
Under 5 years	12,120	6.8%
5 to 9 years	13,650	7.7%
10 to 14 years	14,147	7.9%
15-19 years	12,457	7.0%
20 to 24 years	10,348	5.8%
25 to 34 years	19,242	10.8%
35 to 44 years	28,746	16.2%
45 to 54 years	25,701	14.4%
55 to 59 years	11,493	6.5%
60 to 64 years	9,159	5.1%
65 to 74 years	13,155	7.4%
75 to 84 years	6,044	3.4%
85 years and over	1,705	1.0%
Total	177,967	100.0%

Chart Source: US Census, 2013 American Community Survey 1-Year Estimates.  
Retrieved January 2, 2015 from  
[http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_13\\_1YR\\_DP05&prodType=table](http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_DP05&prodType=table)

## Appendix F-The Sixth Appendix

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2013 Johnston County, NC Population by Gender		
Male	87,137	49.0%
Female	90,830	51.0%
Total Population		

Chart Source: US Census, 2013 American Community Survey 1-Year Estimates.  
Retrieved January 2, 2015 from  
[http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS\\_13\\_1YR\\_DP05&prodType=table](http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?pid=ACS_13_1YR_DP05&prodType=table)

## Appendix G-The Seventh Appendix

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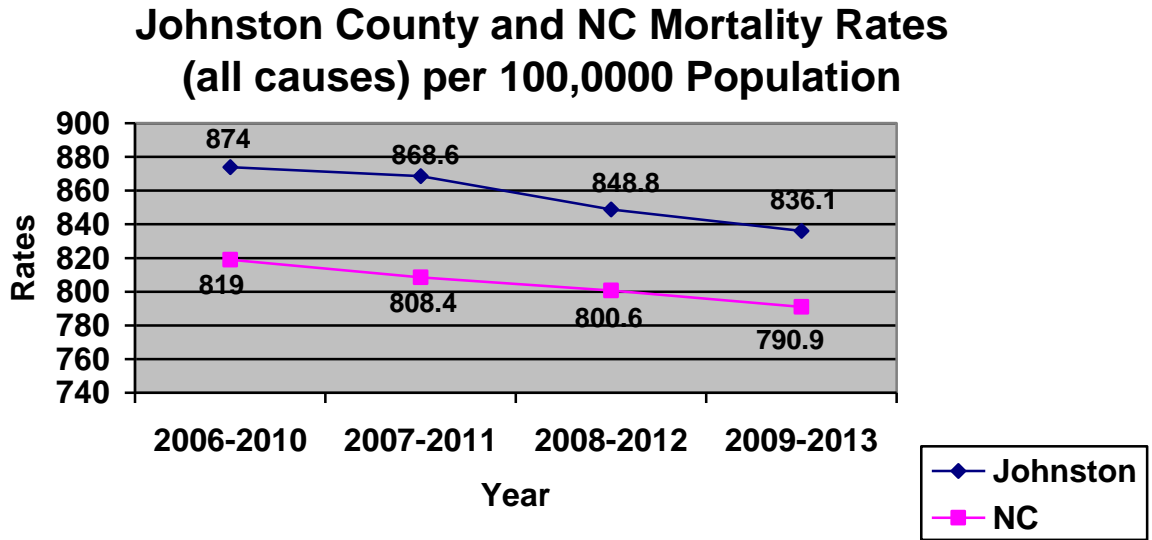


Chart Source: North Carolina State Center for Health Statistics. North Carolina Vital Statistics, Volume 2 Leading Causes of Death Total Death, 2010-2013. Retrieved on December 16, 2014 from <http://www.schs.state.nc.us/data/vital.cfm#vitalvol2>

## Appendix H-The Eighth Appendix

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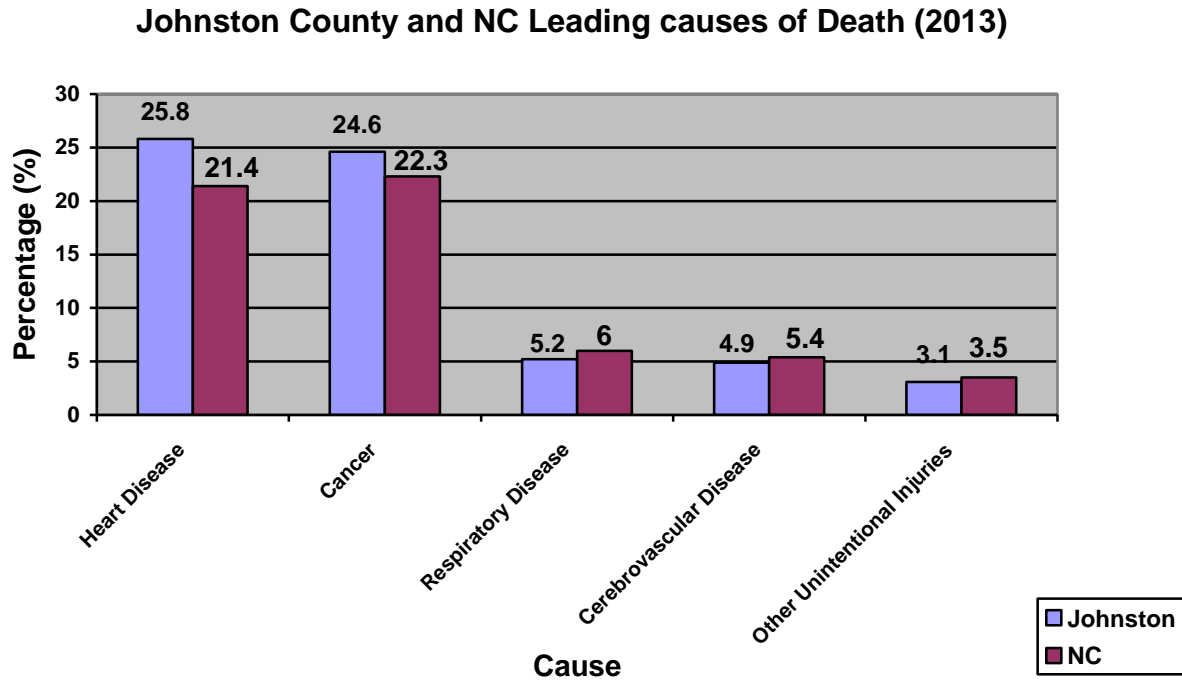


Chart Source: North Carolina State Center for Health Statistics. North Carolina Health Data Query System, Mortality Data Leading Causes of Death. Retrieved on December 16, 2014 on <http://www.schs.state.nc.us/schs/data/lcd/lcd.cfm>

## Johnston County and NC Heart Disease Mortality Rates per 100,000 Population

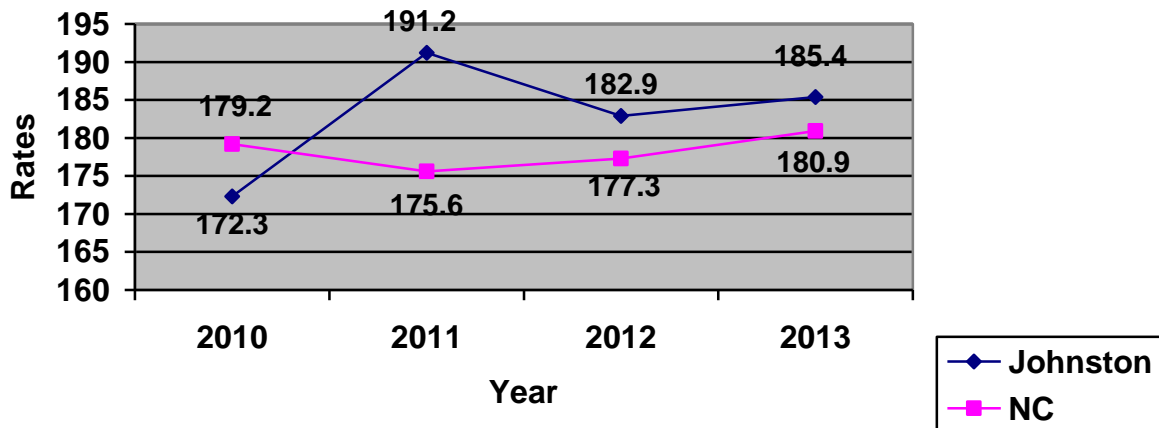


Chart Source: North Carolina State Center for Health Statistics. NC Vital Statistics Volume 2, Leading Causes of Death. Retrieved on December 16, 2014 on <http://www.schs.state.nc.us/data/vital.cfm>

## Appendix J-The Tenth Appendix

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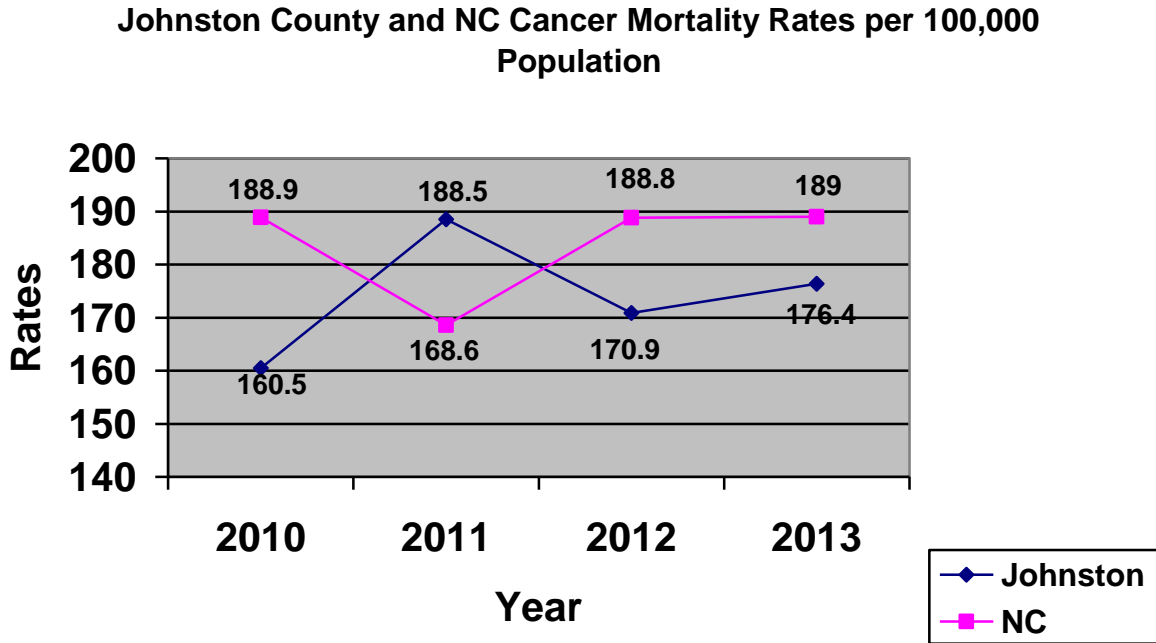


Chart Source: North Carolina State Center for Health Statistics. NC Vital Statistics Volume 2, Leading Causes of Death. Retrieved on December 16, 2014 on <http://www.schs.state.nc.us/data/vital.cfm>

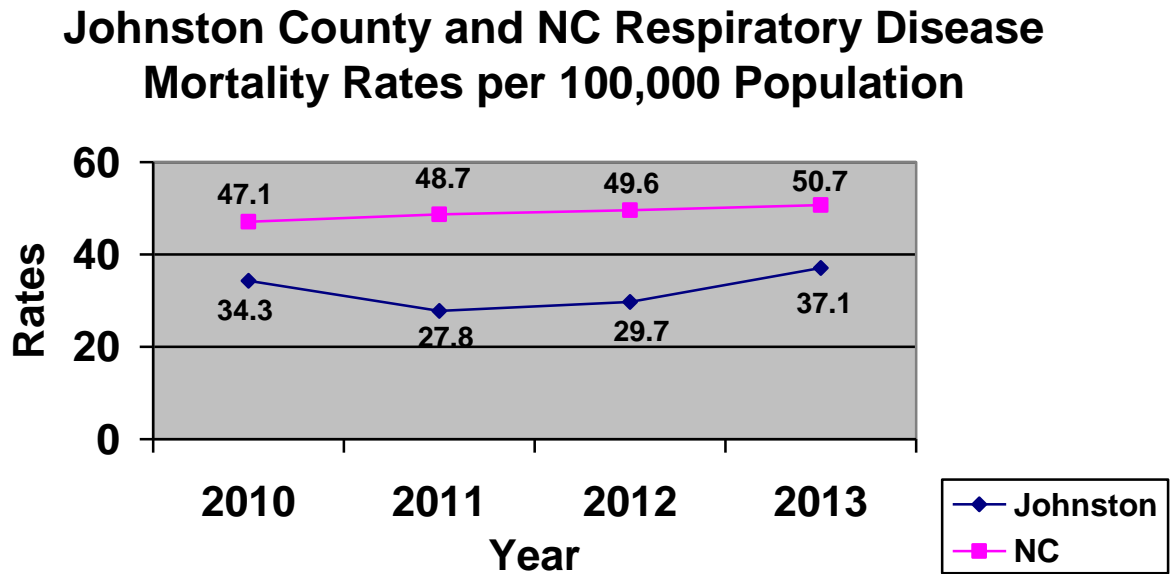


Chart Source: North Carolina State Center for Health Statistics. NC Vital Statistics Volume 2, Leading Causes of Death. Retrieved on December 16, 2014 on <http://www.schs.state.nc.us/data/vital.cfm>

## Appendix L-The Twelfth Appendix

### Top Three Leading Causes of Death in Johnston County by Age Unadjusted Death Rate (2009-2013)

Age Groups	Cause of Death	# of Deaths (2009-2013)	2009-2013 Death Rate	
			Johnston	NC
0-19	Perinatal Conditions	40	15.6	18.2
	Motor Vehicle Injuries	21	8.2	6.5
	Birth Defects	18	7.0	7.9
20-39	Other unintentional injuries	62	28.4	21.1
	Motor Vehicle Injuries	54	24.7	18.3
	Cancer	30	13.7	10.3
40-64	Cancer	508	173.3	174.8
	Heart Disease	388	132.5	118.3
	Other unintentional injuries	75	25.6	30.5
65-84	Heart Disease	747	883.2	652.7
	Cancer	733	866.6	849.3
	Respiratory Disease	172	203.4	250.2
85+	Heart Disease	444	5074.9	3718.6
	Cancer	165	1885.9	1633.6
	Cerebrovascular Disease	90	1028.7	1100.4

Source: North Carolina State Center for Health Statistics. Death Counts and Crude Death Rates Leading Causes of Death, by Age Groups 2009-2013. Retrieved on January 14, 2015 from <http://www.schs.state.nc.us/data/databook/>



## Appendix M-The Thirteenth Appendix

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### The Three Leading Causes of Death in Johnston County by Race and Gender Age-Adjusted (2009-2013)

	White Males	African-American Males	White Females	African-American Females
1	Heart Disease (283.9)	Cancer (310.1))	Heart Disease (188.4)	Heart Disease (193.5)
2	Cancer (242.1)	Heart Disease (300.8)	Cancer (152.4)	Cancer (144.1)
3	All other unintentional injuries (49.6)	Nephritis (65.1)	Chronic Lower Respiratory Disease (40.0)	Cerebrovascular Disease (51.1)

Chart Source: North Carolina State Center for Health Statistics. Race-Sex Specific Age Adjusted Death Rates by County, 2009-2013. Retrieved on January 14, 2015 from <http://www.schs.state.nc.us/data/databook/>

## Appendix N-The Fourteenth Appendix

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### Johnston County and NC Fetal Mortality Rates

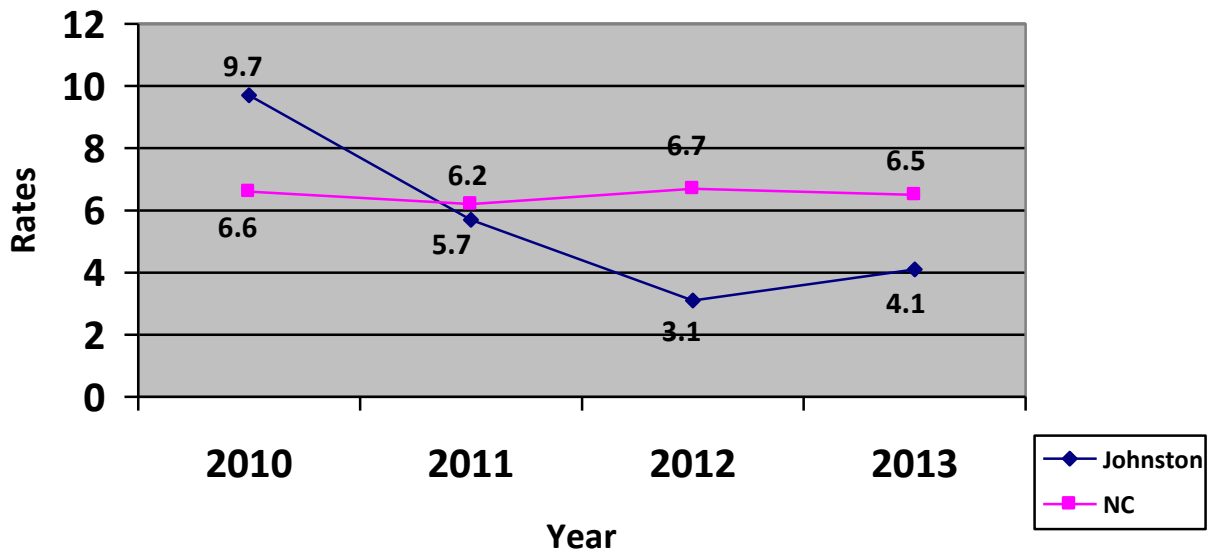


Chart Source: North Carolina State Center for Health Statistics. North Carolina Vital Statistics Volume 1, 2010-2013. Retrieved on January 14, 2015 from <http://www.schs.state.nc.us/data/vital.cfm#vitalvol1>

### Johnston County and NC Infant Mortality Rates per 1,000 Live births

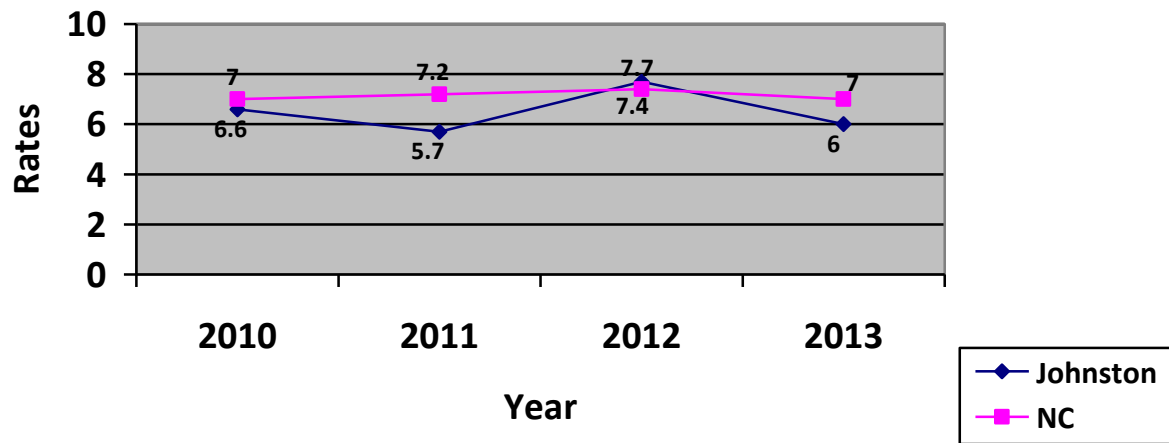


Chart Source: North Carolina State Center for Health Statistics. North Carolina Vital Statistics Volume 1, 2010-2013. Retrieved on January 14, 2015 from <http://www.schs.state.nc.us/data/vital.cfm#vitalvol1>

## Appendix P-The Sixteenth Appendix

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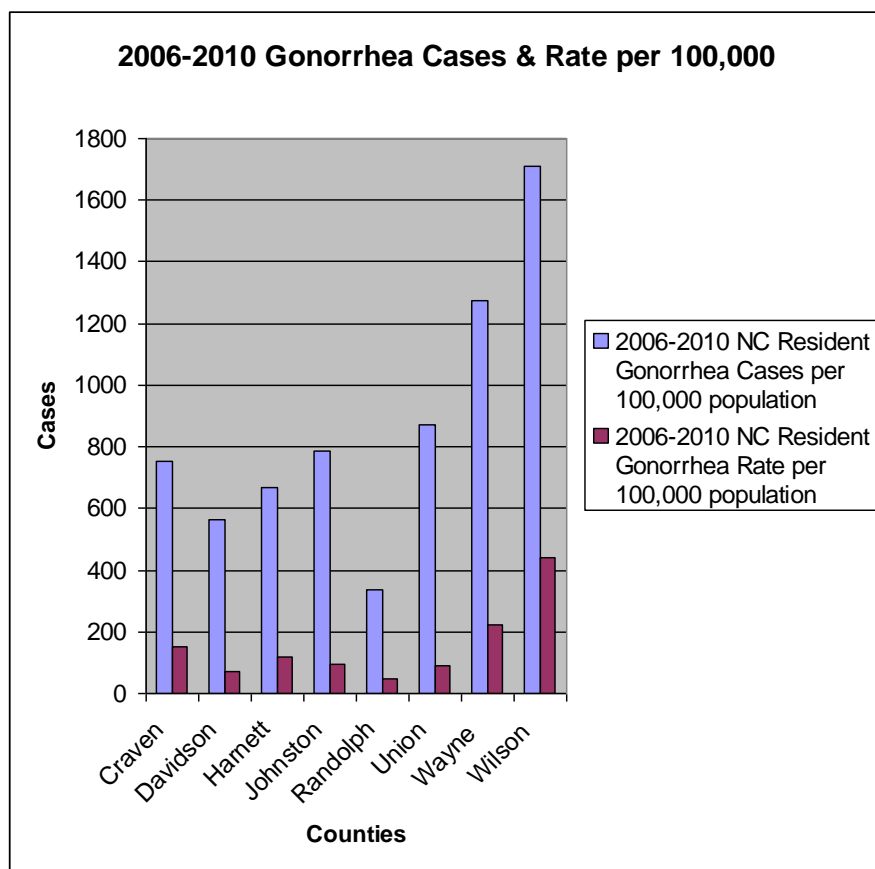


Chart Source: Department of Public Health. Epidemiology.  
<http://epi.publichealth.nc.gov/cd/stds/figures/std10rpt.pdf>. Retrieved on August 10, 2014

## Appendix Q-The Seventeenth Appendix

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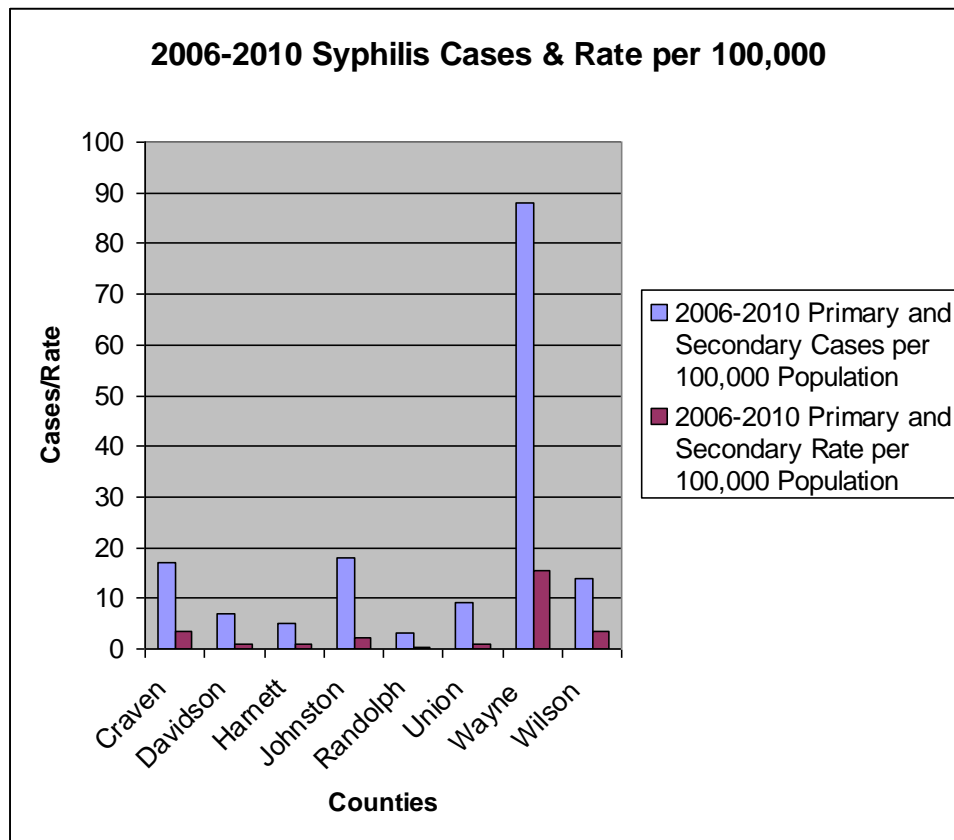


Chart Source: Department of Public Health. Epidemiology.

<http://epi.publichealth.nc.gov/cd/stds/figures/std10rpt.pdf>. Retrieved on August 10, 2014

## Appendix R-The Eighteenth Appendix

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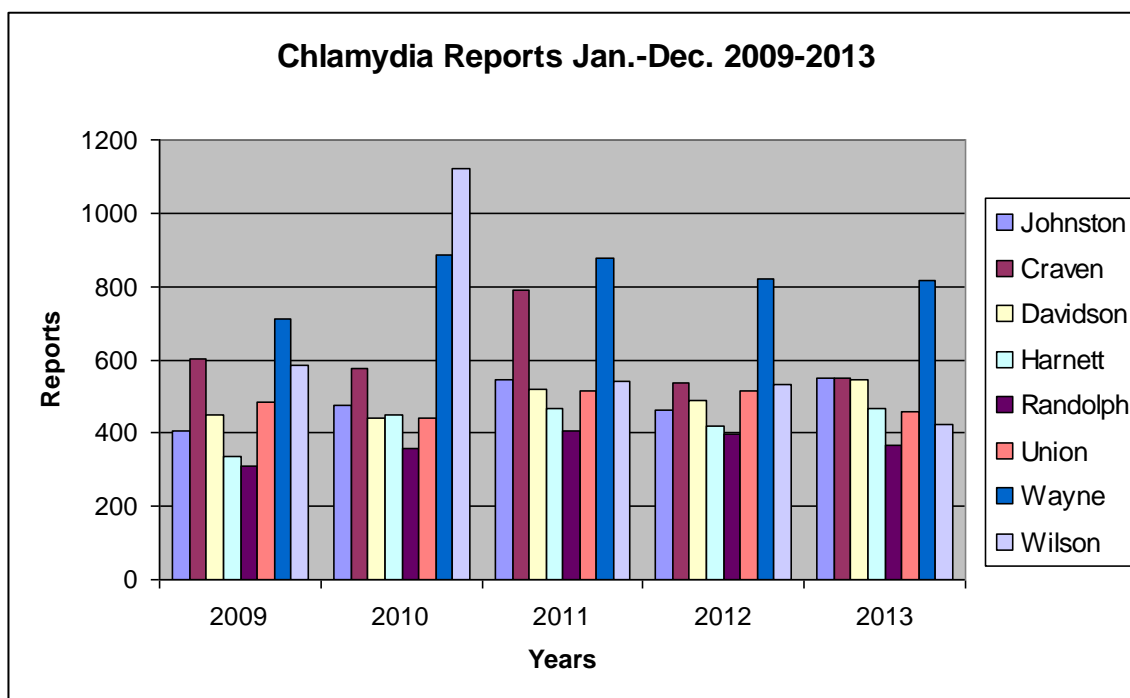


Chart Source: Department of Health and Human Service: Epidemiology. North Carolina  
2013 HIV/STD Surveillance Report. Retrieved November 06, 2014

## Appendix S-The Nineteenth Appendix

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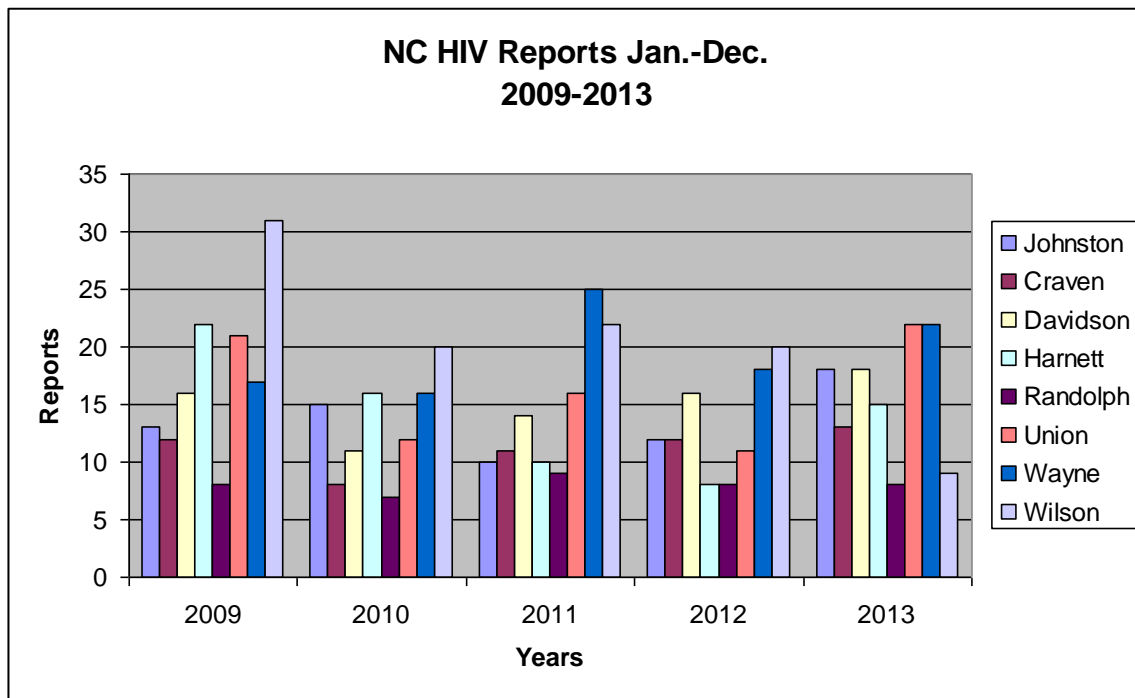
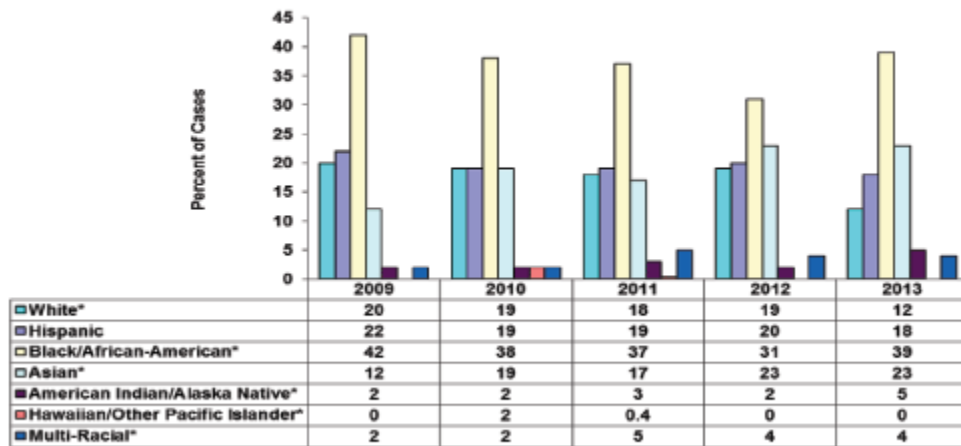


Chart Source: Department of Health and Human Service: Epidemiology. North Carolina  
2013 HIV/STD Surveillance Report. Retrieved November 06, 2014

## Appendix T-The Twentieth Appendix

N.C. TB Cases by Race and Ethnicity: 2009 – 2013



DATA SOURCE: North Carolina Electronic Disease Surveillance System (NC EDSS)

Chart Source: 2013 Tuberculosis Statistics For North Carolina, Figure 6. N.C. TB Cases by Race and Ethnicity: 2009-2013. Retrieved February 27, 2015 from <http://epi.publichealth.nc.gov/cd/tb/figures/tbannual2013.pdf>



## Appendix U-The Twenty-First Appendix

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Johnston County TB Cases 2010-2014	
<i>Year</i>	<i>Number of Cases</i>
2008	10
2009	7
2010	5
2011	4
2012	4
2013	1
2014	5

Chart Source: Phone call NC Communicable Disease Branch. Information gathered from North Carolina Electronic Disease Surveillance System. Retrieved on February 27, 2015.

## Appendix V-The Twenty-Second Appendix

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<i>Johnston County Cases of Pertussis 2010-2014</i>	
Year	Number of Cases
2010	12
2011	5
2012	3
2013	18
2014	21

Chart Source: Johnston County Public Health Department, Epidemiology Clinic Nurse Manager. Retrieved on February 27, 2015.

## Appendix W-The Twenty-Third Appendix

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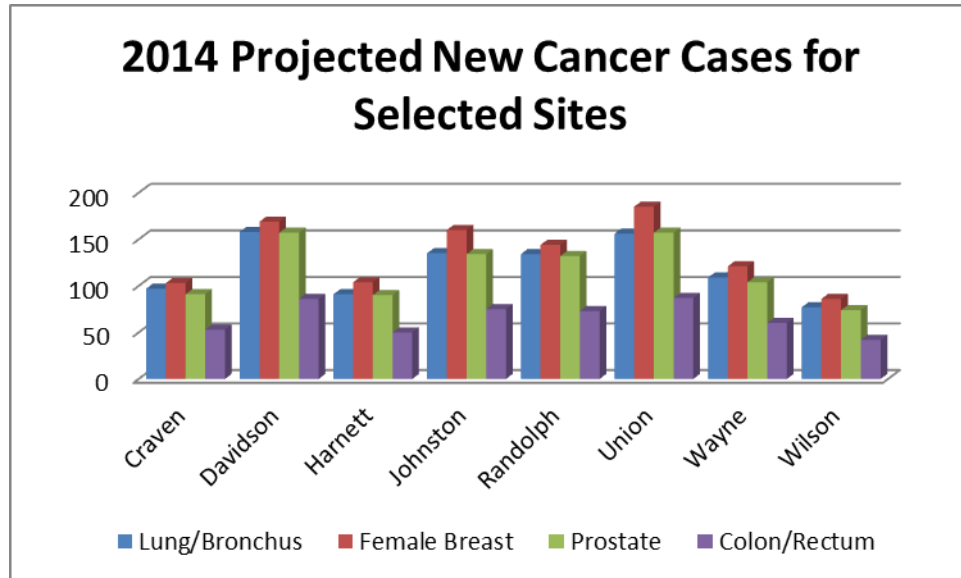


Chart Source: [North Carolina State Center for Health Statistics. Cancer Incidence Rates.](http://www.schs.state.nc.us/schs/CCR/proj14co.pdf) Retrieved November 6, 2014 from <http://www.schs.state.nc.us/schs/CCR/proj14co.pdf>

## Appendix X-The Twenty-Four Appendix

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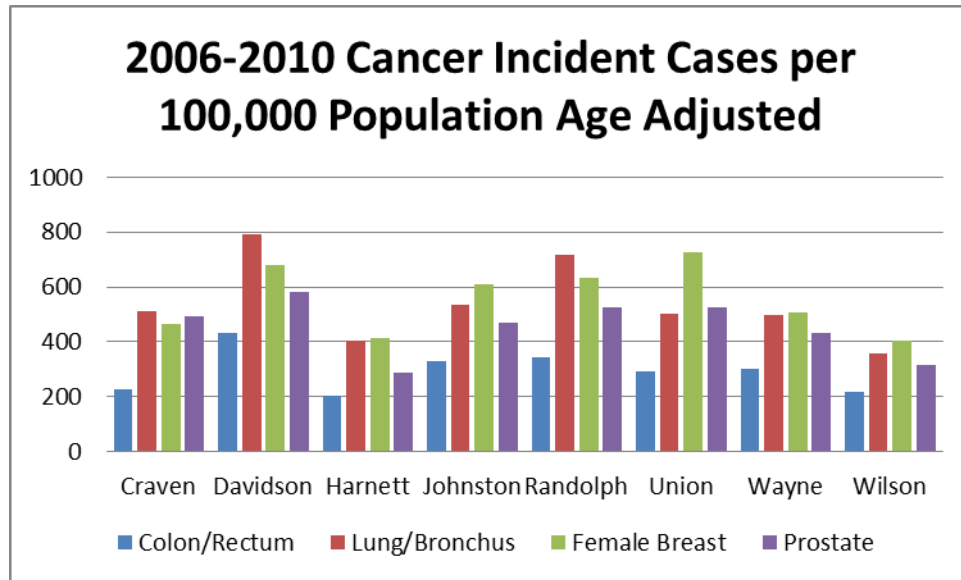


Chart Source: [North Carolina State Center for Health Statistics. Cancer Incidence Rates.](http://www.schs.state.nc.us/schs/CCR/incidence/2010/5yearRates.pdf) Retrieved November 6, 2014 from <http://www.schs.state.nc.us/schs/CCR/incidence/2010/5yearRates.pdf>

## Appendix Y-The Twenty-Fifth Appendix

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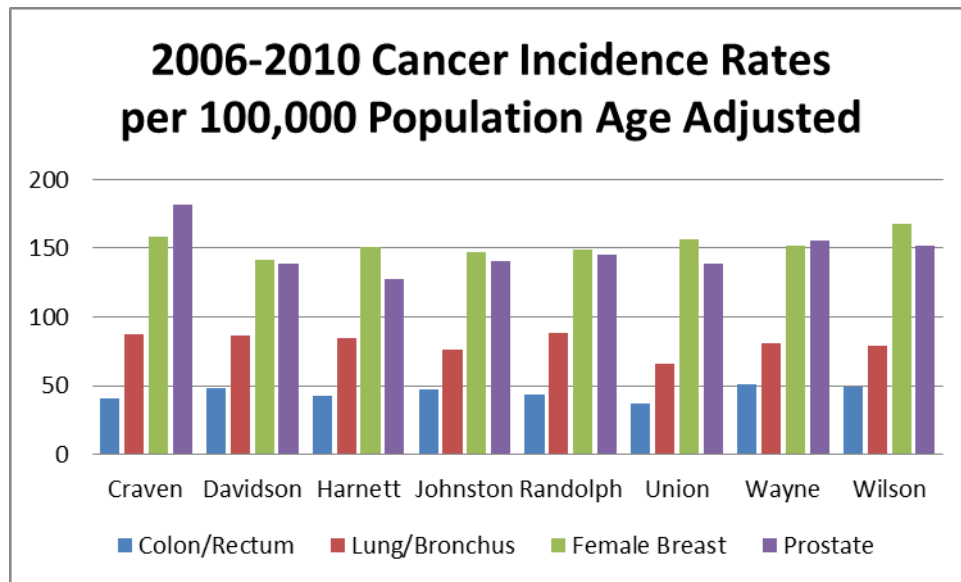


Chart Source: North Carolina State Center for Health Statistics. Cancer Incidence Rates. Retrieved November 6, 2014 from <http://www.schs.state.nc.us/schs/CCR/incidence/2010/5yearRates.pdf>

## Appendix Z-The Twenty-Sixth Appendix

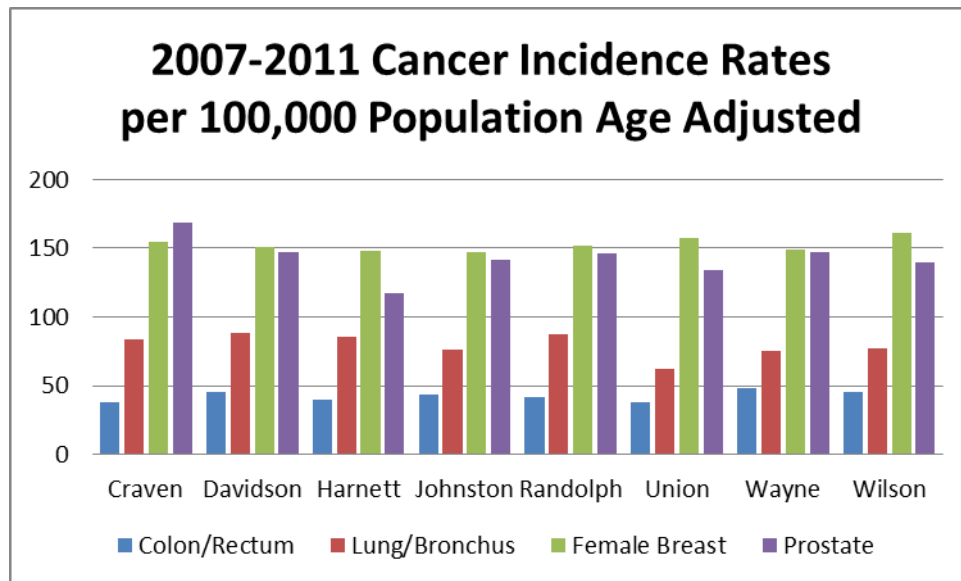


Chart Source: North Carolina State Center for Health Statistics. Cancer Incidence Rates. Retrieved November 6, 2014 from <http://www.schs.state.nc.us/schs/CCR/incidence/2011/5yearRates.pdf>

## Appendix AA-The Twenty-Seventh Appendix

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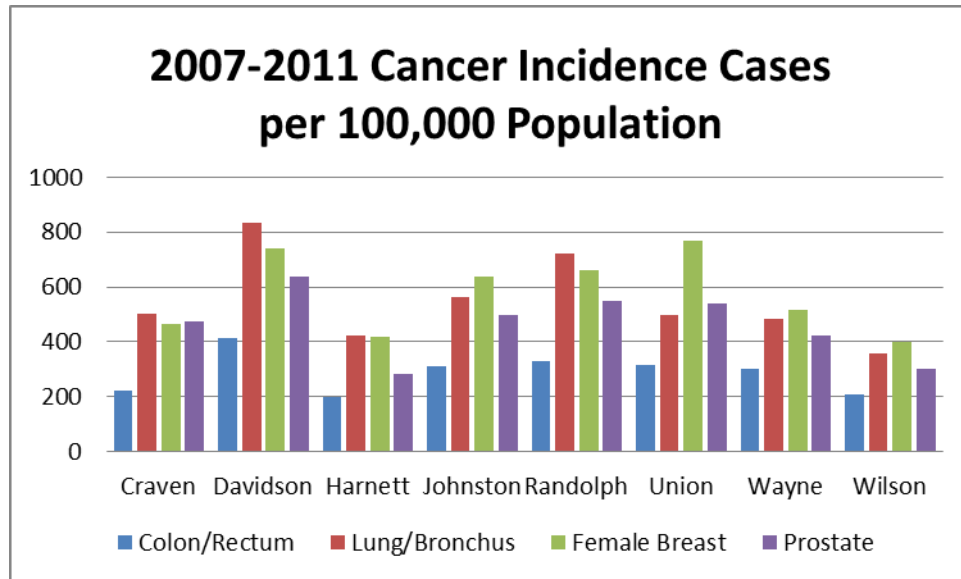


Chart Source: North Carolina State Center for Health Statistics. Cancer Incidence Rates. Retrieved November 6, 2014 from <http://www.schs.state.nc.us/schs/CCR/incidence/2011/5yearRates.pdf>

## Appendix BB-The Twenty-Eighth Appendix

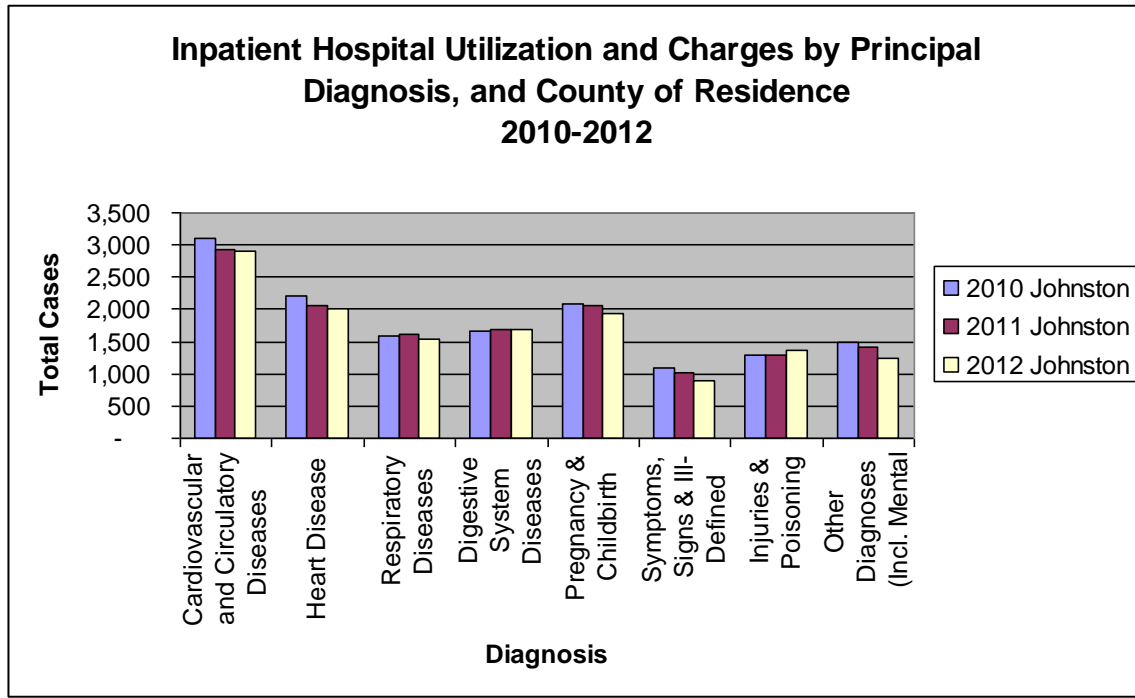


Chart Source: North Carolina State Center for Health Statistics. Inpatient Hospital Utilization and Charges by Principal Diagnosis. Retrieved November 6, 2014 from <http://www.schs.state.nc.us/schs/data/databook/2014/CD19%20allhosps.rtf>



## Appendix CC-The Twenty-Ninth Appendix

### **2010-2012 Active Johnston County Health Professionals**

	2009	2010	2011	2012
<b><u>Physicians</u></b>	<b><u>Number</u></b>	<b><u>Number</u></b>	<b><u>Number</u></b>	<b><u>Number</u></b>
Non-Federal Physicians	128	129	127	126
Primary Care Physicians	80	76	70	62
-Family Practice	40	37	34	36
-General Practice	1	1	1	1
-Internal Medicine	22	23	19	12
-Obstetrics/Gynecology	7	8	9	6
-Pediatrics	10	7	7	7
Other Specialties	48	53	57	64
Physicians per 10,000 Population	7.6	7.6	7.4	7.2
Primary Care Physicians per 10,000 Population	4.8	4.5	4.1	3.5
Federal Physicians	0	0	1	0
<b><u>Dentists and Dental Hygienists</u></b>				
Dentists	32	37	36	38
Dental Hygienists	75	85	92	98
<b><u>Nurses</u></b>				
Registered Nurses	674	693	705	721
-Nurse Practitioners	21	22	20	24
-Certified Nurse Midwives	1	0	1	1
Licensed Practical Nurses	203	173	164	167
<b><u>Other Health Professionals</u></b>				
Chiropractors	13	15	15	14
Occupational Therapists	16	24	24	24
Occupational Therapy Assistants	8	11	12	12
Optometrists	13	17	18	19
Pharmacists	105	114	113	120
Physical Therapists	40	37	36	39
Physical Therapy Assistants	21	20	20	21
Physician Assistants	28	31	39	45
Podiatrists	0	0	0	1

Practicing Psychologists	4	4	4	5
Psychological Associates	16	14	15	17
Respiratory Therapists	38	37	36	34

Chart Source: Cecil G. Sheps Center for Health Services Research University of North Carolina at Chapel Hill, North Carolina Health Professions 2009-2012 Data Book. Retrieved on November 4, 2014 from

[http://www.shepscenter.unc.edu/hp/publications/2009\\_HPDS\\_DataBook.pdf](http://www.shepscenter.unc.edu/hp/publications/2009_HPDS_DataBook.pdf)

[http://www.shepscenter.unc.edu/hp/publications/2010\\_HPDS\\_DataBook.pdf](http://www.shepscenter.unc.edu/hp/publications/2010_HPDS_DataBook.pdf)

[http://www.shepscenter.unc.edu/hp/publications/2011\\_HPDS\\_DataBook.pdf](http://www.shepscenter.unc.edu/hp/publications/2011_HPDS_DataBook.pdf)

[http://www.shepscenter.unc.edu/hp/publications/2012\\_HPDS\\_DataBook.pdf](http://www.shepscenter.unc.edu/hp/publications/2012_HPDS_DataBook.pdf)

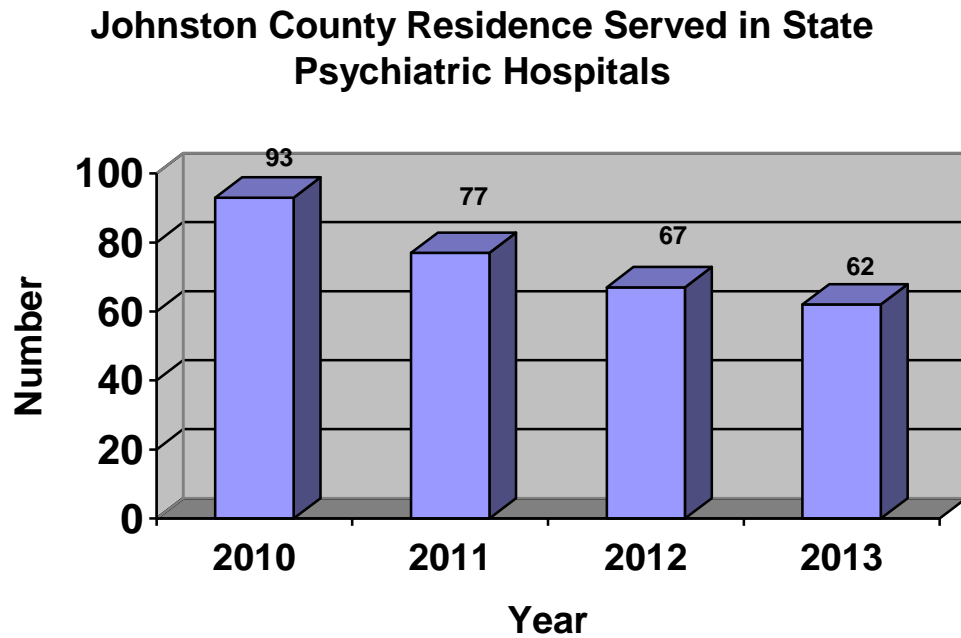


Chart Source: [Log Into North Carolina \(LINC\), Persons served in State Psychiatric Hospitals, 2010-2013.](http://data.osbm.state.nc.us/pls/linc/dyn_linc_main.showHPDS_DataBook.pdf) Retrieved on February, 23, 2015 from [http://data.osbm.state.nc.us/pls/linc/dyn\\_linc\\_main.showHPDS\\_DataBook.pdf](http://data.osbm.state.nc.us/pls/linc/dyn_linc_main.showHPDS_DataBook.pdf)

### **Johnston County Residence Served in NC Alcohol and Drug Treatment Centers**

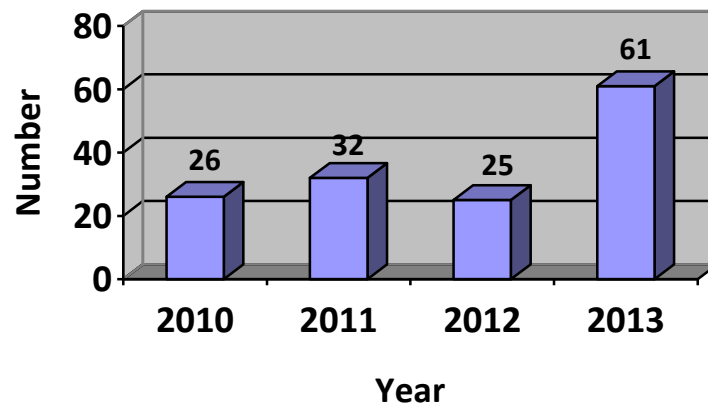


Chart Source: [Log Into North Carolina \(LINC\), Persons served in a NC Alcohol and Drug Treatment Centers, 2010-2013. Retrieved on February, 23, 2015 from http://data.osbm.state.nc.us/pls/linc/dyn\\_linc\\_main.show](http://data.osbm.state.nc.us/pls/linc/dyn_linc_main.show)

## Appendix FF-The Thirty Second Appendix

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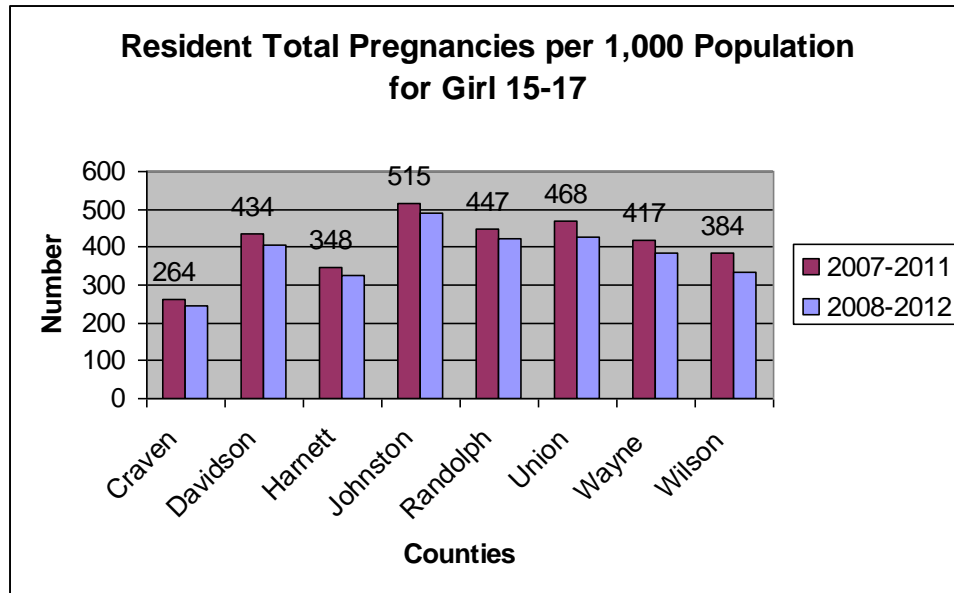


Chart Source: State Center for Health Statistics, North Carolina Reported Pregnancies 2008-2011. Retrieved from <http://www.schs.state.nc.us/data/vital.cfm#vitalpreg>

## Appendix GG-The Thirty-Third Appendix

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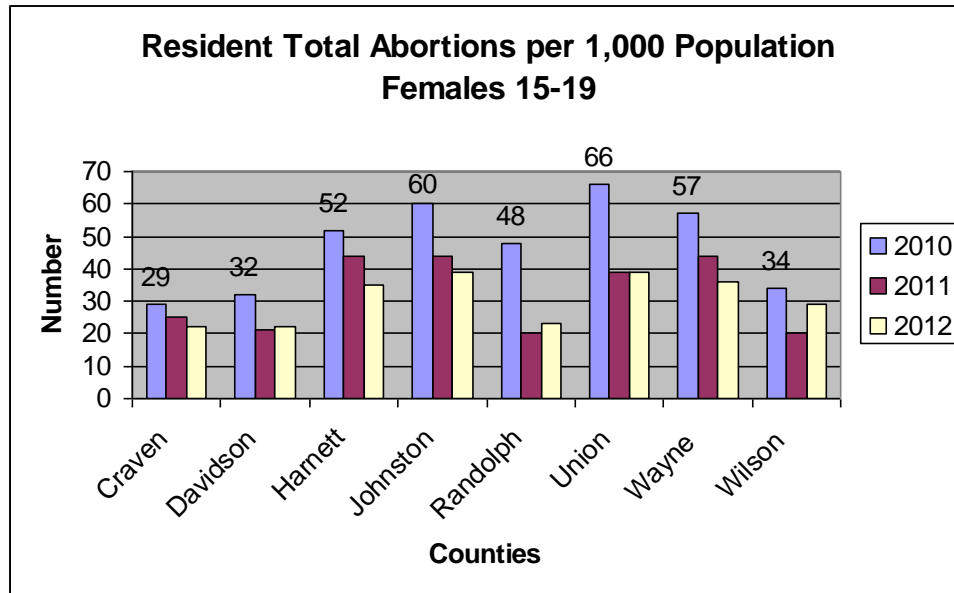


Chart Source: [State Center for Health Statistics, North Carolina Reported Pregnancies 2010-2012](http://www.schs.state.nc.us/data/vital.cfm#vitalpreg). Retrieved from <http://www.schs.state.nc.us/data/vital.cfm#vitalpreg>

## Appendix HH-The Thirty-Fourth Appendix

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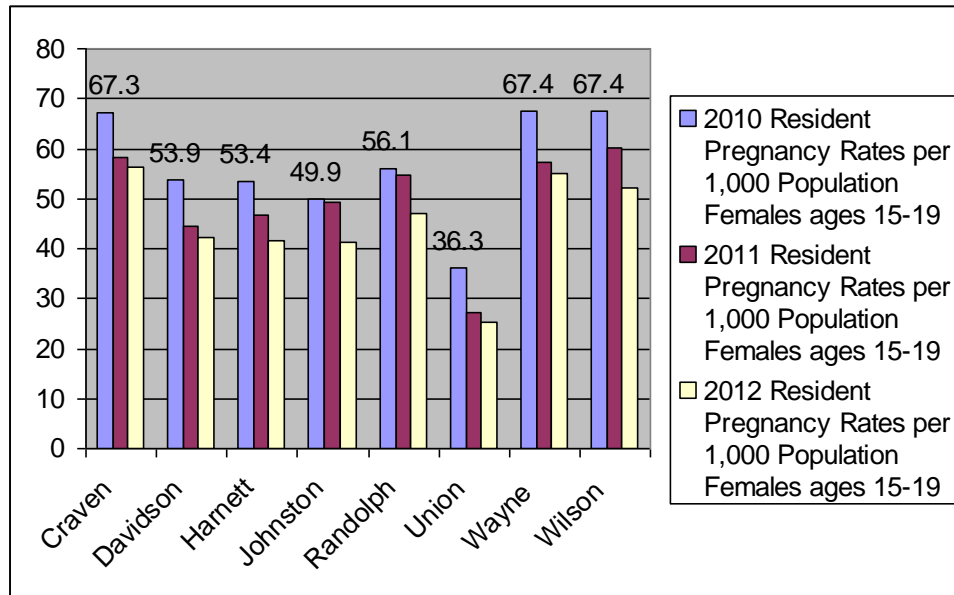


Chart Source: State Center for Health Statistics, North Carolina Reported Pregnancies 2010-2012. Retrieved from <http://www.schs.state.nc.us/data/vital.cfm#vitalpreg>

## Appendix II-The Thirty-Fifth Appendix

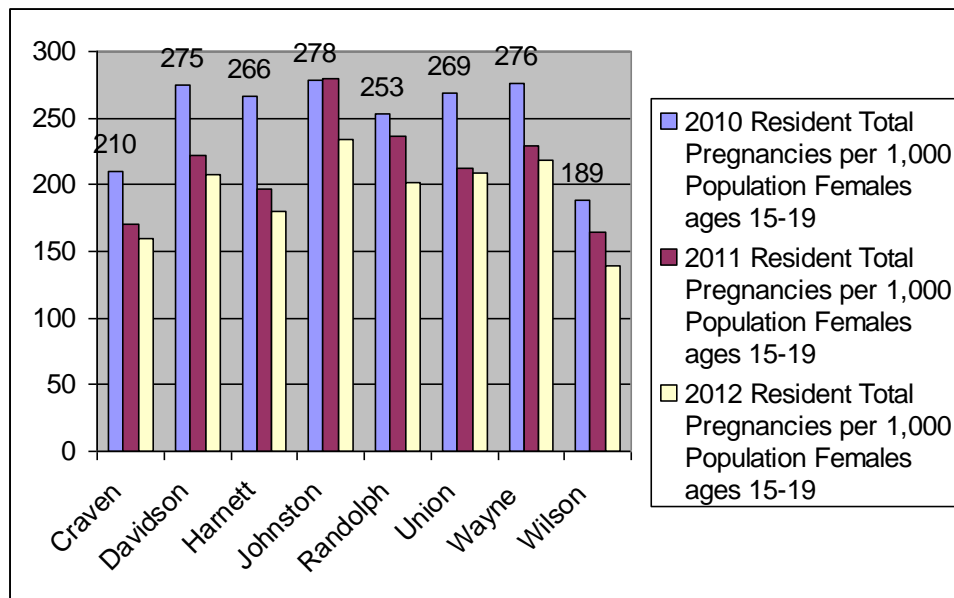


Chart Source: State Center for Health Statistics, North Carolina Reported Pregnancies 2010-2012. Retrieved from <http://www.schs.state.nc.us/data/vital.cfm#vitalpreg>



## Appendix JJ-The Thirty-Sixth Appendix

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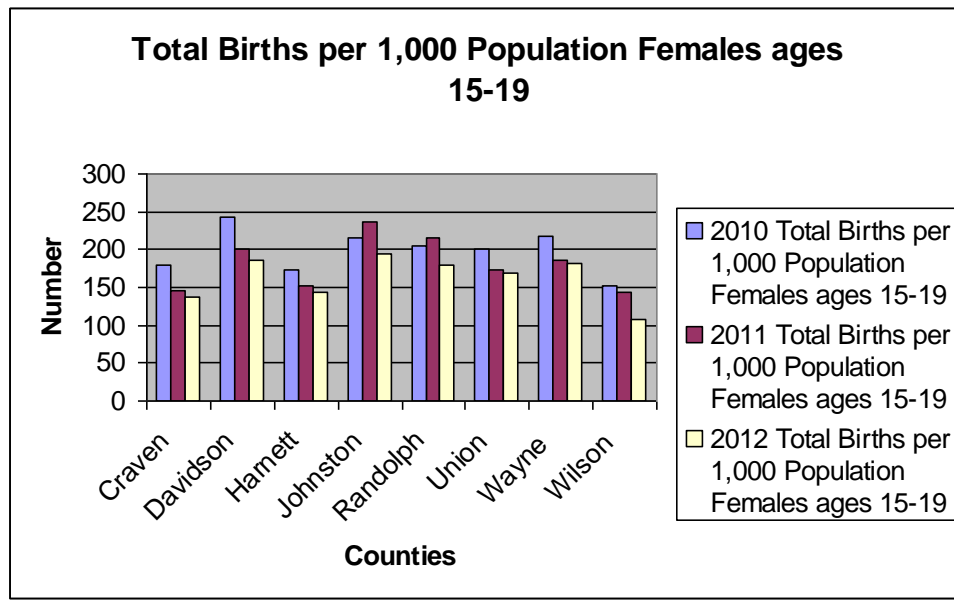


Chart Source: [State Center for Health Statistics, North Carolina Reported Pregnancies 2010-2012](http://www.schs.state.nc.us/data/vital.cfm#vitalpreg). Retrieved from <http://www.schs.state.nc.us/data/vital.cfm#vitalpreg>

## Appendix KK-The Thirty-Seventh Appendix

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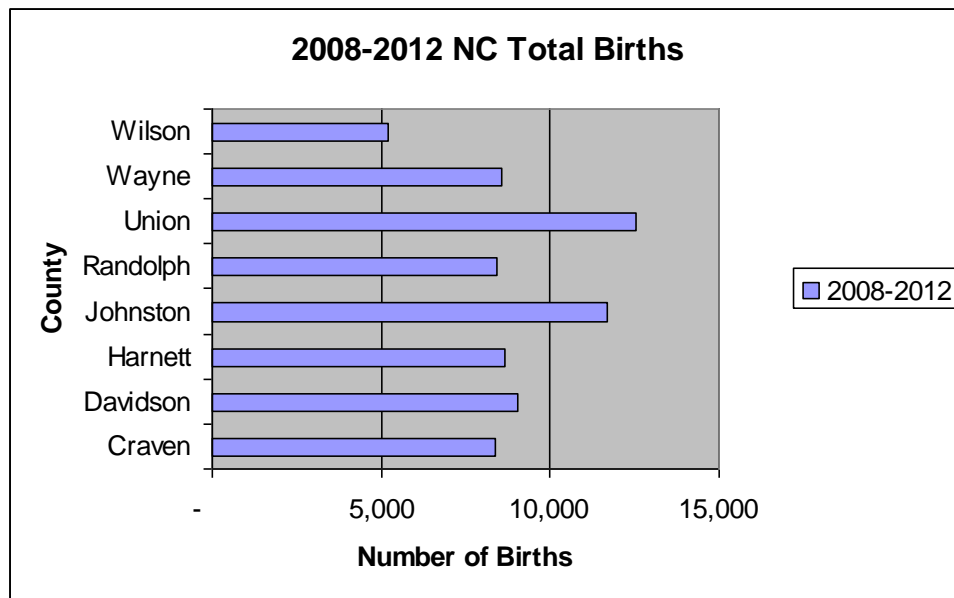


Chart Source: [State Center for Health Statistics, North Carolina Reported Pregnancies 2008-2012](http://www.schs.state.nc.us/data/vital.cfm#vitalpreg). Retrieved from <http://www.schs.state.nc.us/data/vital.cfm#vitalpreg>

## Appendix LL-The Thirty-Eighth Appendix

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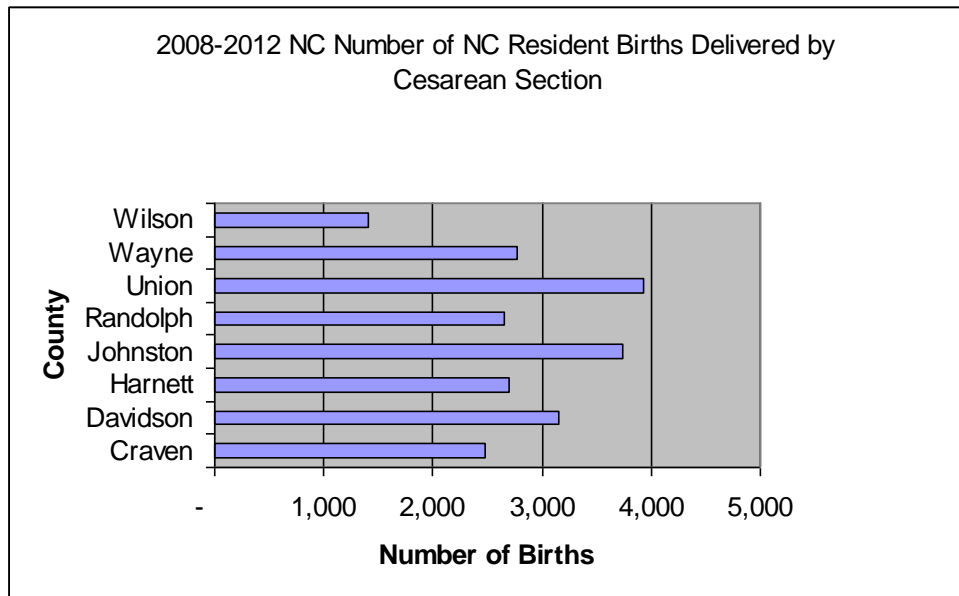


Chart Source: State Center for Health Statistics, North Carolina Reported Pregnancies 2008-2012 Retrieved from <http://www.schs.state.nc.us/data/vital.cfm#vitalpreg>

## Appendix MM-The Thirty-Ninth Appendix

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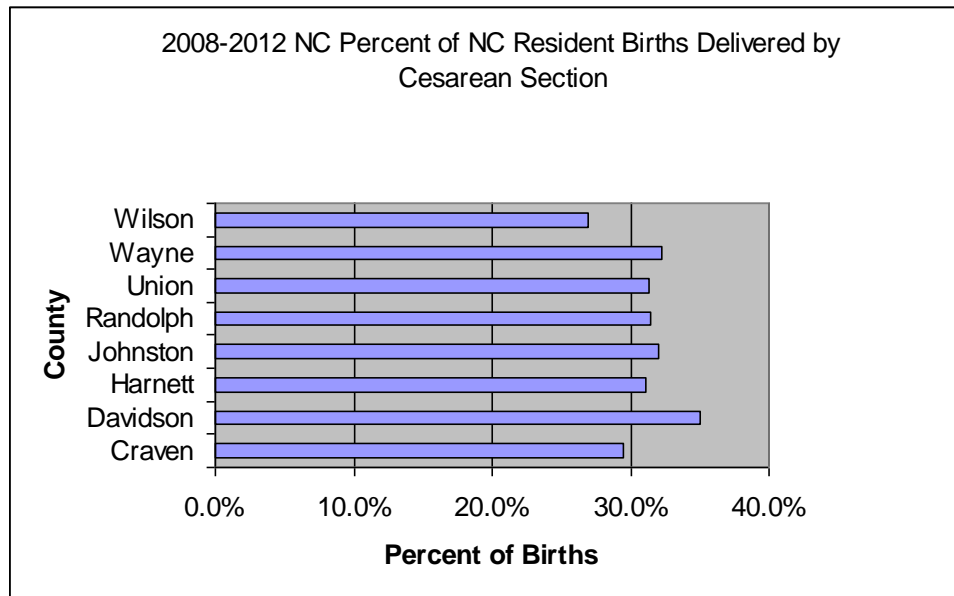


Chart Source: State Center for Health Statistics, North Carolina Reported Pregnancies 2008-2012. Retrieved from <http://www.schs.state.nc.us/data/vital.cfm#vitalpreg>

## Appendix NN-The Fortieth Appendix

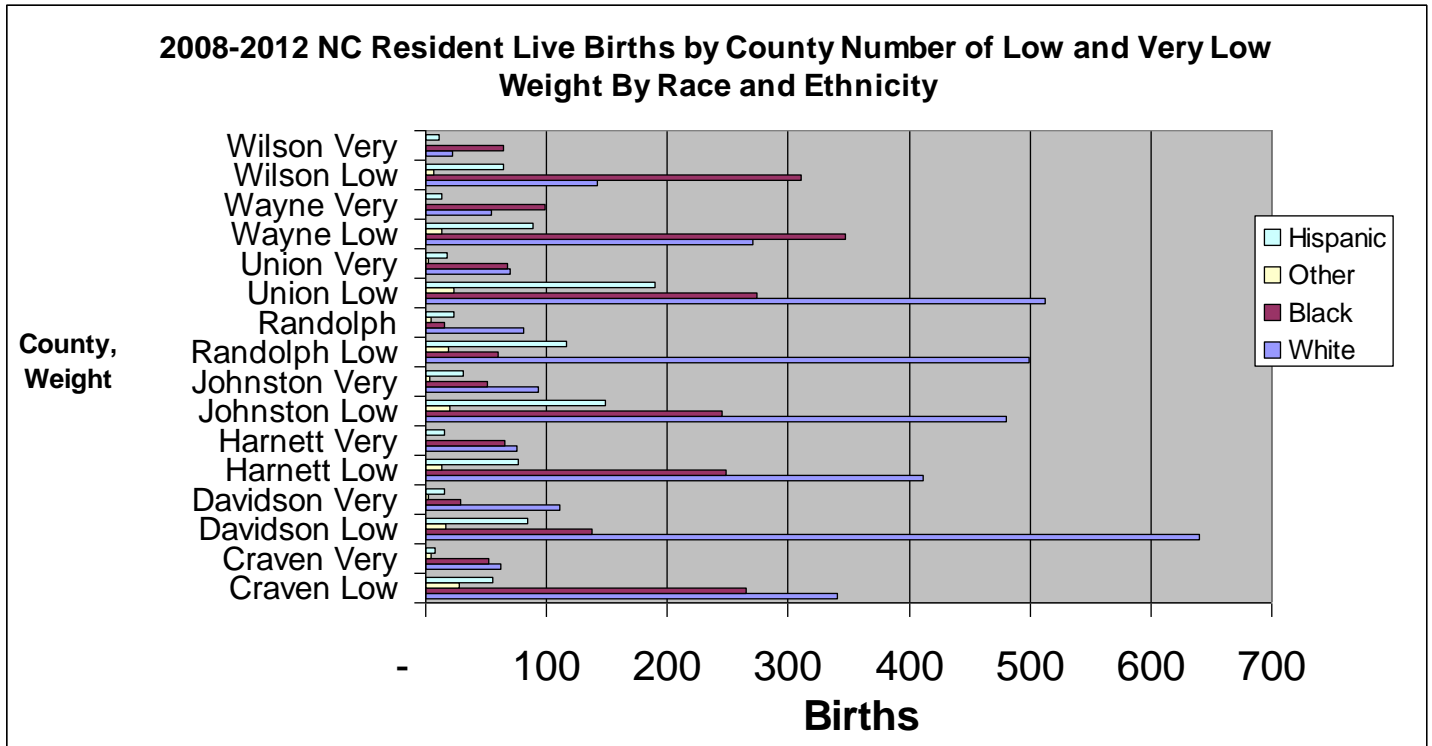


Chart Source: State Center for Health Statistics, North Carolina Reported Pregnancies 2008-2012 Retrieved from <http://www.schs.state.nc.us/data/vital.cfm#vitalpreg>

## Appendix OO-The Forty-First Appendix

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### Childhood Blood Lead Surveillance

	Craven	Davidson	Harnett	Johnston	Randolph	Union	Wayne	Wilson
2009								
# of Children Tested	2,413	2,588	2,381	3,125	2,586	2,717	2,827	1,766
Percent of Children Tested	26.7%	21.1%	22.9%	19.4%	22.8%	14.1%	26.8%	26.1%
Total # of confirmed cases	3	4	4	2	4		9	8
	NC 2009 confirmed cases 219							

Children's Environmental Health Unit. County Level Summary Data for NC, 2009. Data retrieved on August 15, 2014

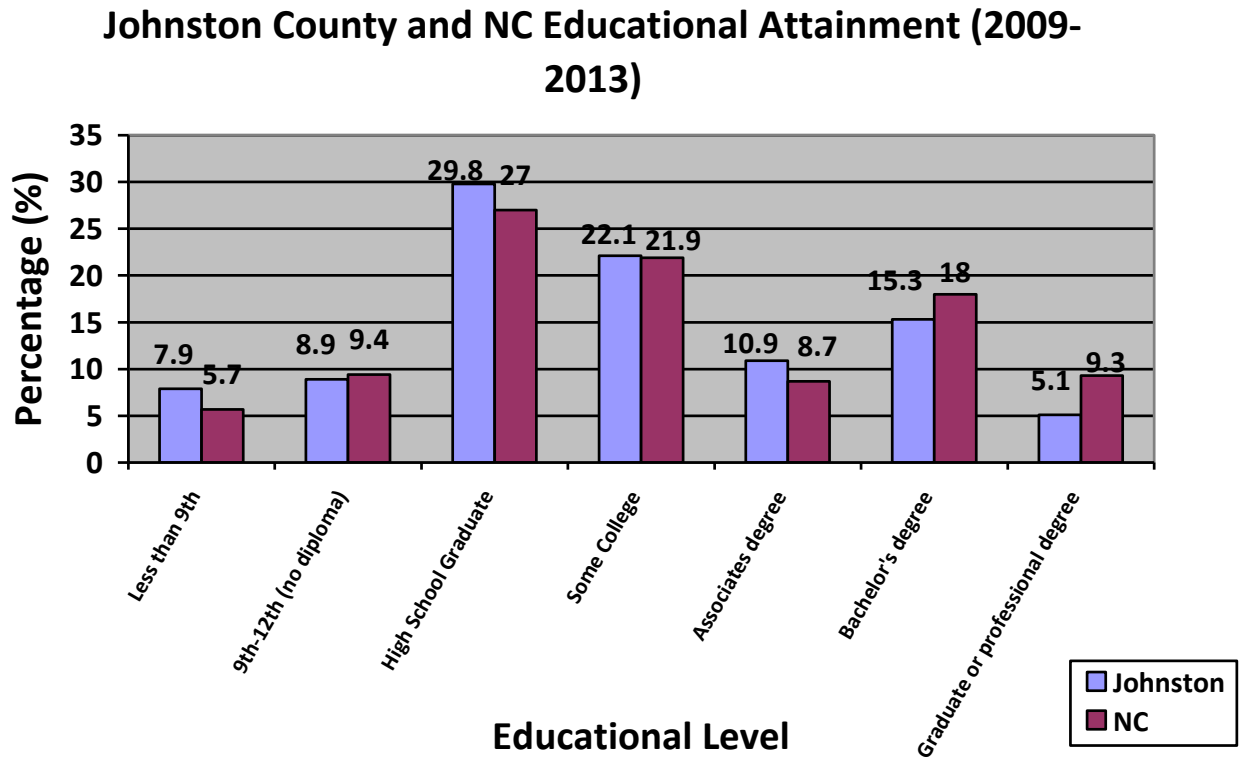


Chart Source: US Census Bureau. Social Characteristics 2009-2013 American Community Survey 5 year estimates. Retrieved on December 11, 2014 from <http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk>

## Johnston County and NC Dropout Rate

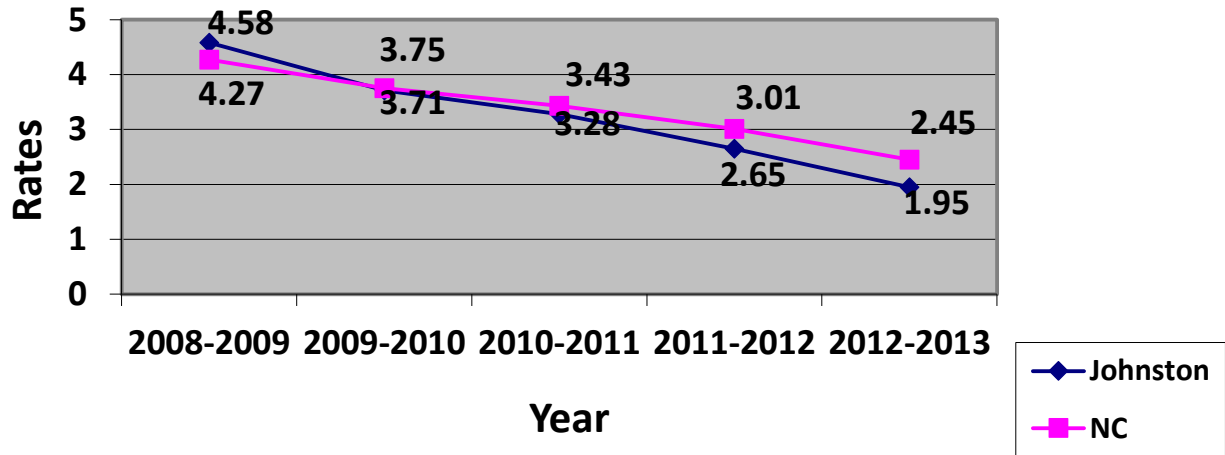


Chart Source: North Carolina Department of Public Instruction. Consolidated data Report 2012-2013. Retrieved on December 11, 2014 from <http://www.dpi.state.nc.us/research/dropout/reports/>



## Appendix RR-The Forty-Fourth Appendix

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**Peer County High School Drop Out Rates (2012-2013)**

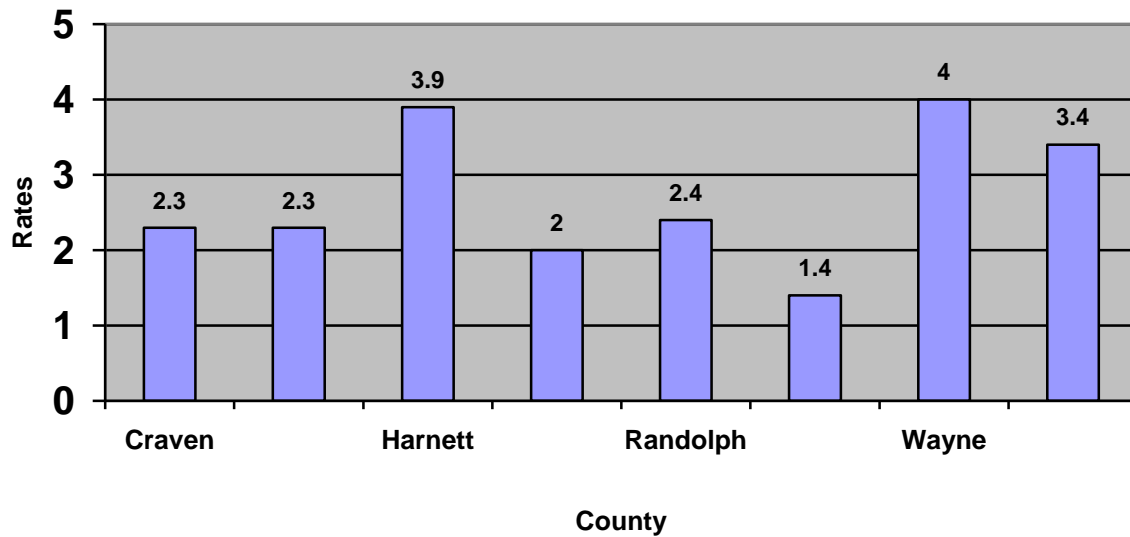


Chart Source: North Carolina Department of Public Instruction. Consolidated data Report 2012-2013. Retrieved on December 11, 2014 from <http://www.dpi.state.nc.us/research/dropout/reports/>

### Average SAT Scores (Quantitative and Verbal)

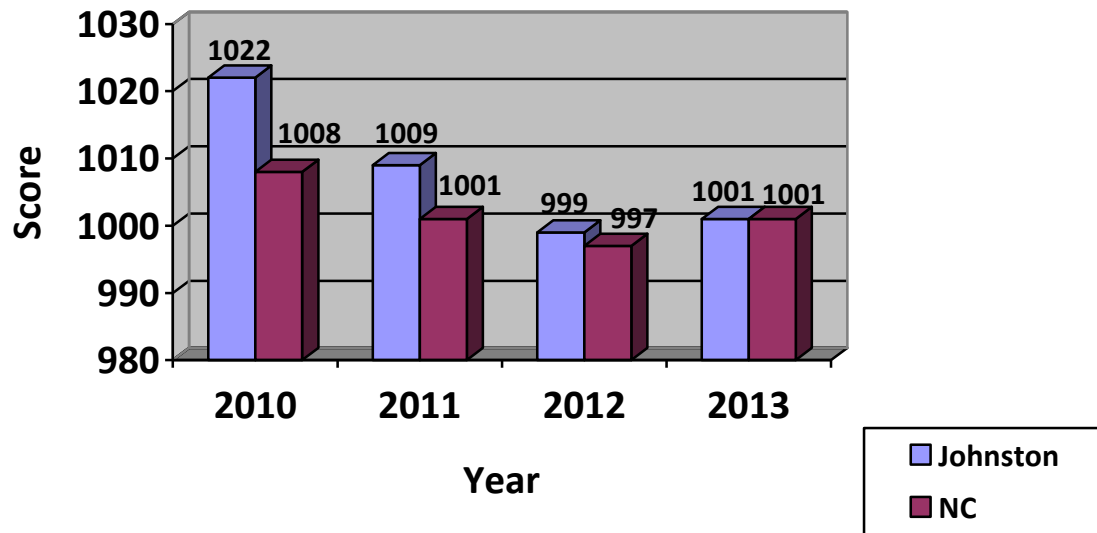


Chart Source: North Carolina Department of Public Instruction. SAT Report 2012-2013.  
Retrieved on December 11, 2014 from  
<http://www.dpi.state.nc.us/accountability/reporting/sat/>

## Appendix TT-The Forty-Sixth Appendix

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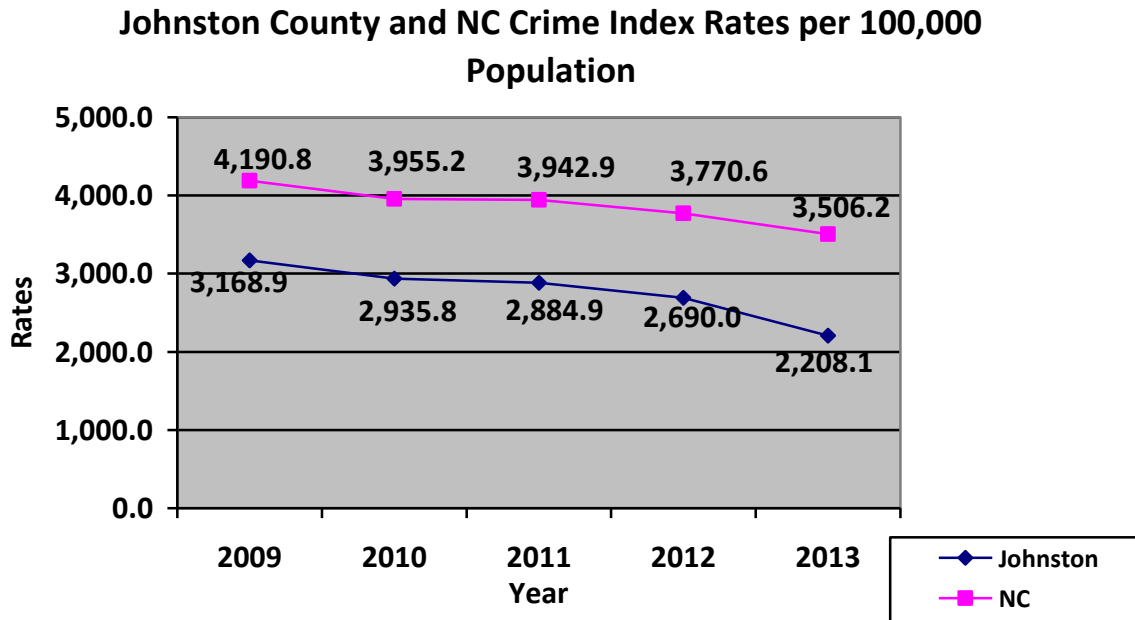


Chart Source: North Carolina Department of Justice. Index Offenses. Retrieved on February 23, 2015 from <http://crimereporting.ncdoj.gov/Reports.aspx>

## Appendix UU-The Forty-Seventh Appendix

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<b>Ten Year Trend Johnston County Offenses</b>										
<b>Offense</b>	<b>2004</b>	<b>2005</b>	<b>2006</b>	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Murder	9	6	12	5	4	2	10	5	0	4
Rape	29	26	26	32	50	41	34	31	28	23
Robbery	102	95	117	109	135	86	74	71	54	53
Aggravate d Assault	231	252	328	308	291	251	248	212	237	206
Burglary	1,230	1,473	1,497	1,453	1,685	1,693	1,509	1,569	1,509	1,081
Larceny	2,785	2,529	2,882	2,908	2,861	2,573	2,602	2,689	2,585	2,297
MV Theft	479	331	399	424	395	332	233	250	153	146
Total	4,865	4,712	5,261	5,239	5,421	4,978	4,710	4,827	4,566	3,810

Chart Source: North Carolina Department of Justice. Index Offenses. Retrieved on February 23, 2015 from <http://crimereporting.ncdoj.gov/Reports.aspx>

## Appendix VV-The Forty-Eighth Appendix

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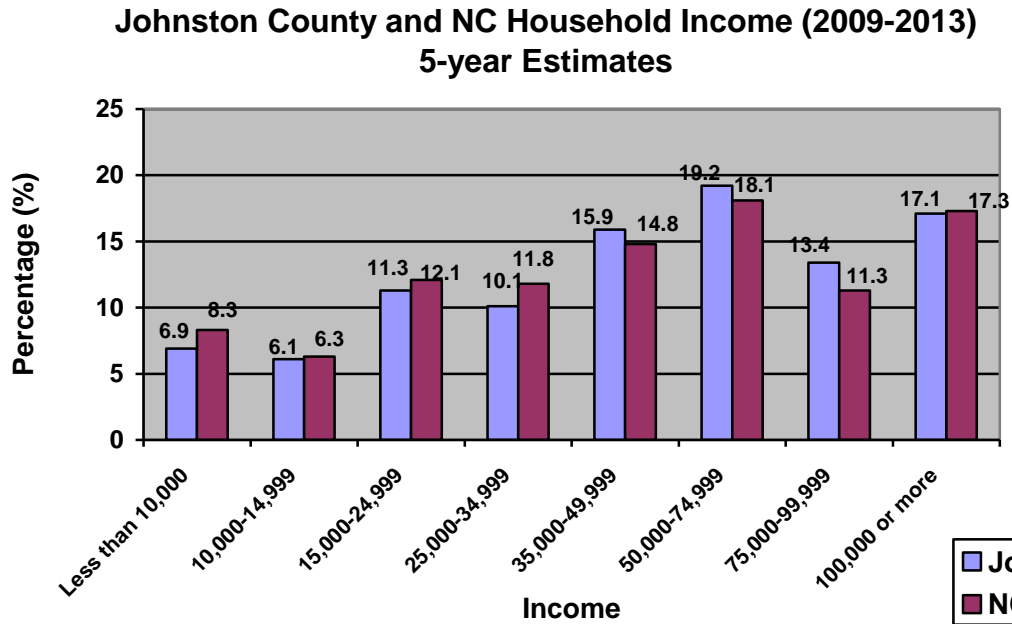


Chart Source: US Census Bureau. Economic Characteristics, 2009-2013 American Community Survey 5-Year Estimates. Retrieved on December 12, 2014 from <http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk>

### Johnston County and NC Poverty Percentage (All People in the last 12 months)

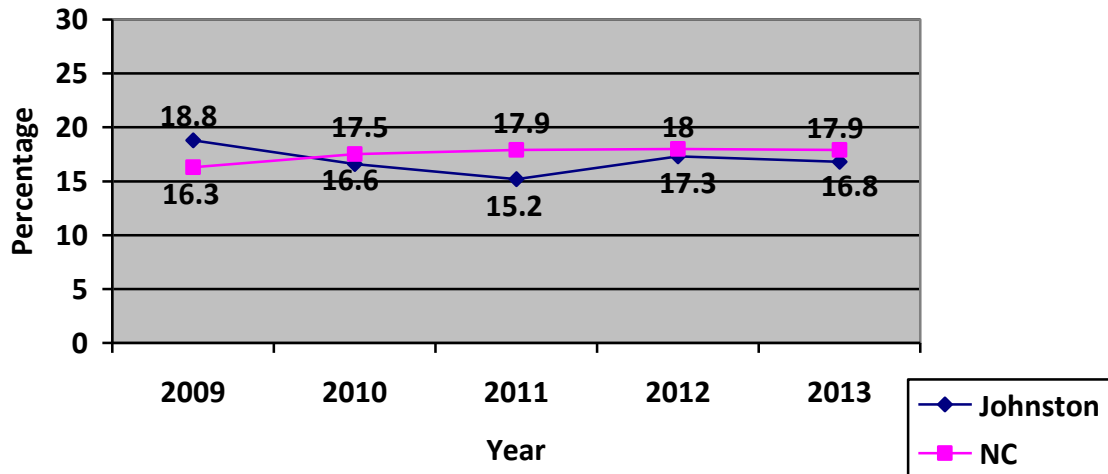


Chart Source: US Census Bureau. Comparative Economic Characteristics, 2009-2013 American Community Survey 1-Year Estimates. Retrieved on December 12, 2014 from <http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk>

**Peer County Comparison Poverty Percentage (2013)**  
**All People in the last 12 Months**

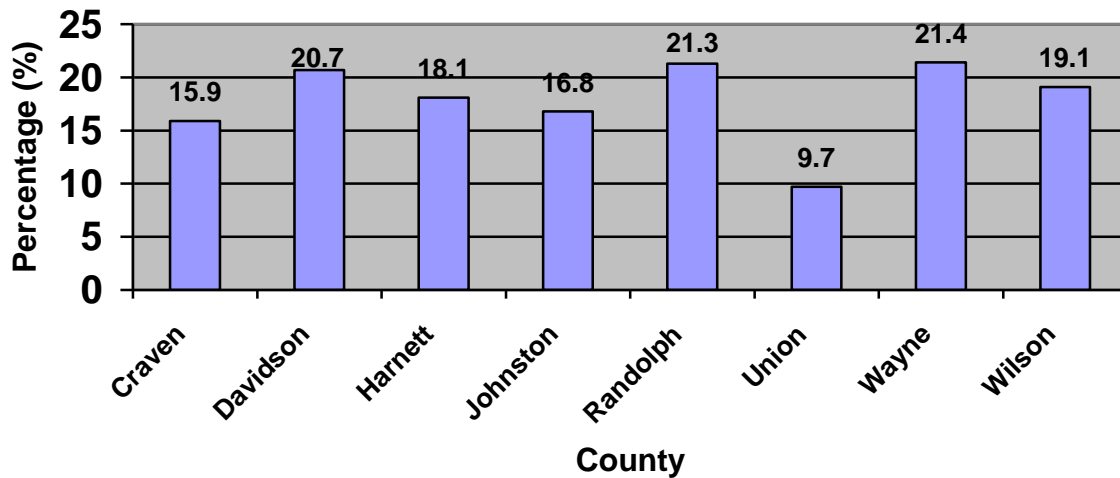


Chart Source: US Census Bureau. Economic Characteristics, 2009-2013 American Community Survey 5-Year Estimates. Retrieved on December 12, 2014 from <http://quickfacts.census.gov/qfd/states/37/37101.html>

## Appendix YY-The Fifty-First Appendix

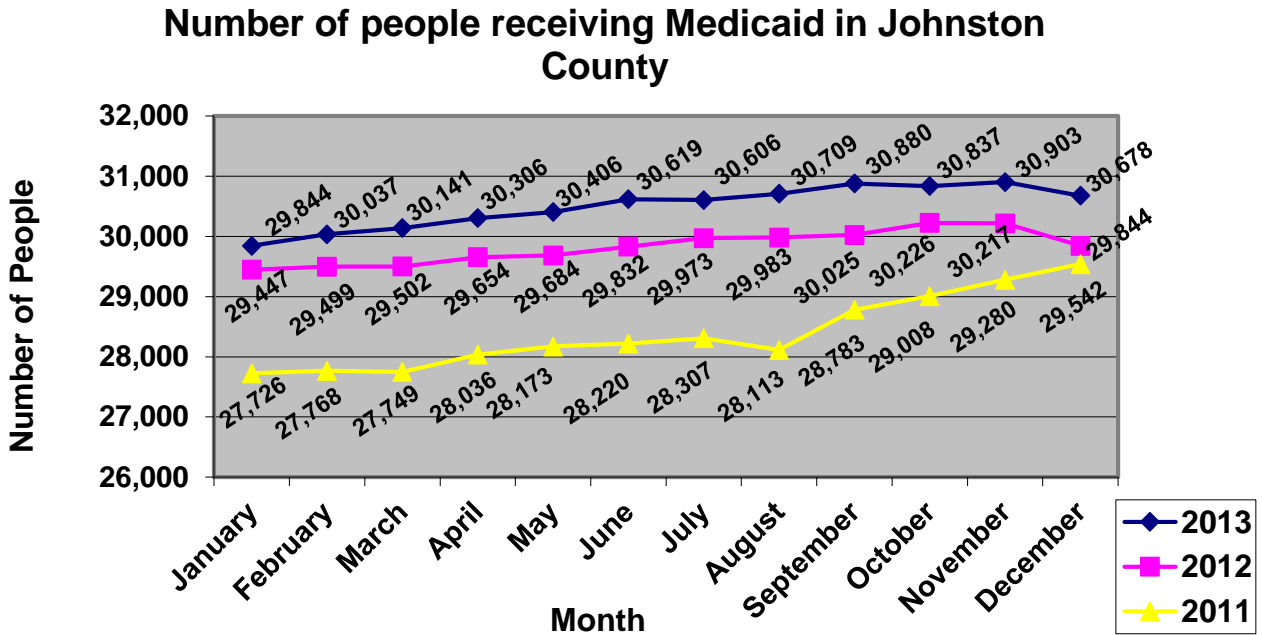


Chart Source: North Carolina Division of Medical Assistance. Economic Characteristics, Title XIX Medicaid Eligibles. Retrieved on December 12, 2014 from <http://www.ncdhhs.gov/dma/elig/index.htm>



**Peer County Comparison of Obese Adults  
Percentage (2013)**

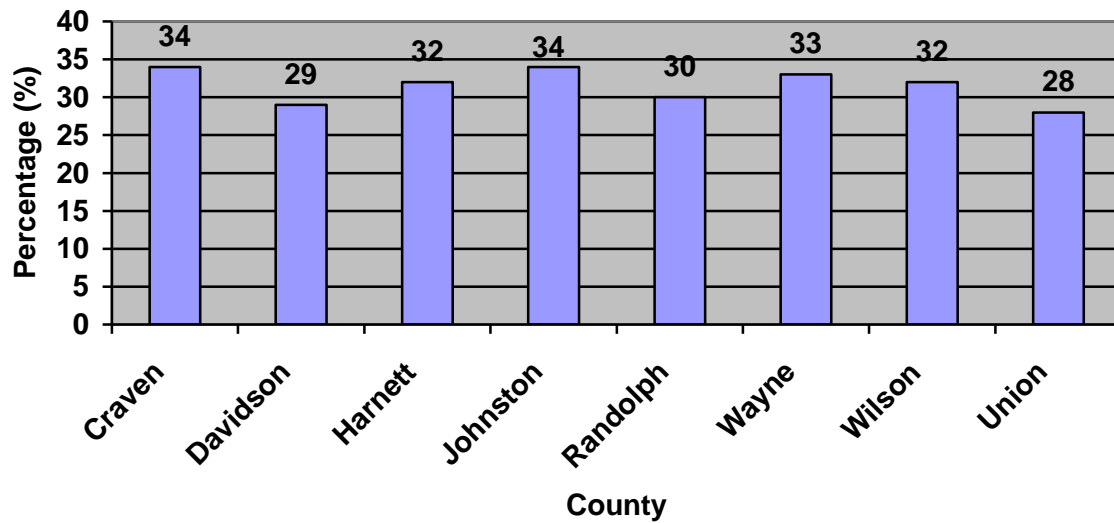


Chart Source: County Health Rankings and Roadmaps. Obesity,  
<http://www.countyhealthrankings.org/app/north-carolina/2014/measure/factors/11/data>

**Peer County Comparison of Physical Inactivity  
Percentage (2013)**

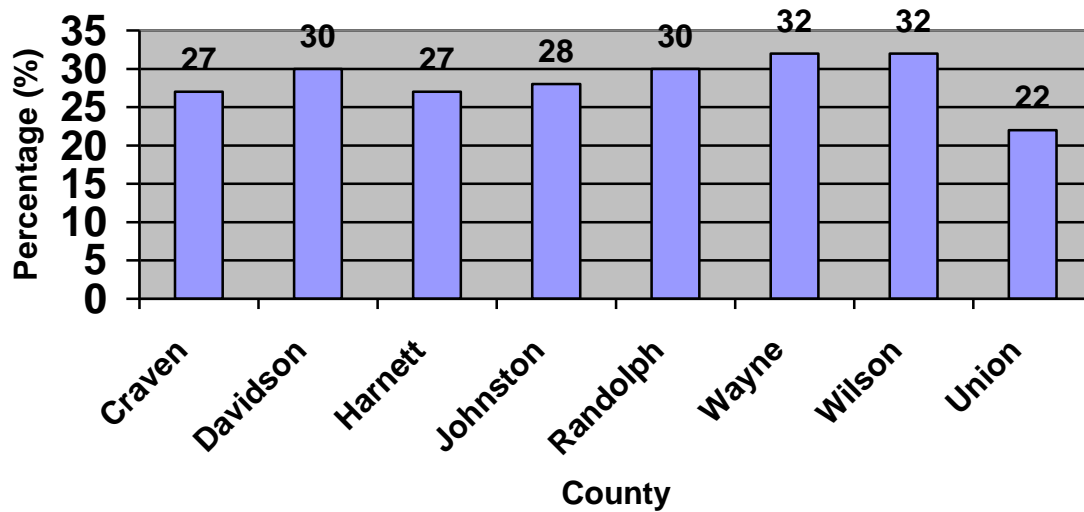


Chart Source: County Health Rankings and Roadmaps, Physical Inactivity.  
<http://www.countyhealthrankings.org/app/north-carolina/2014/measure/factors/70/data>

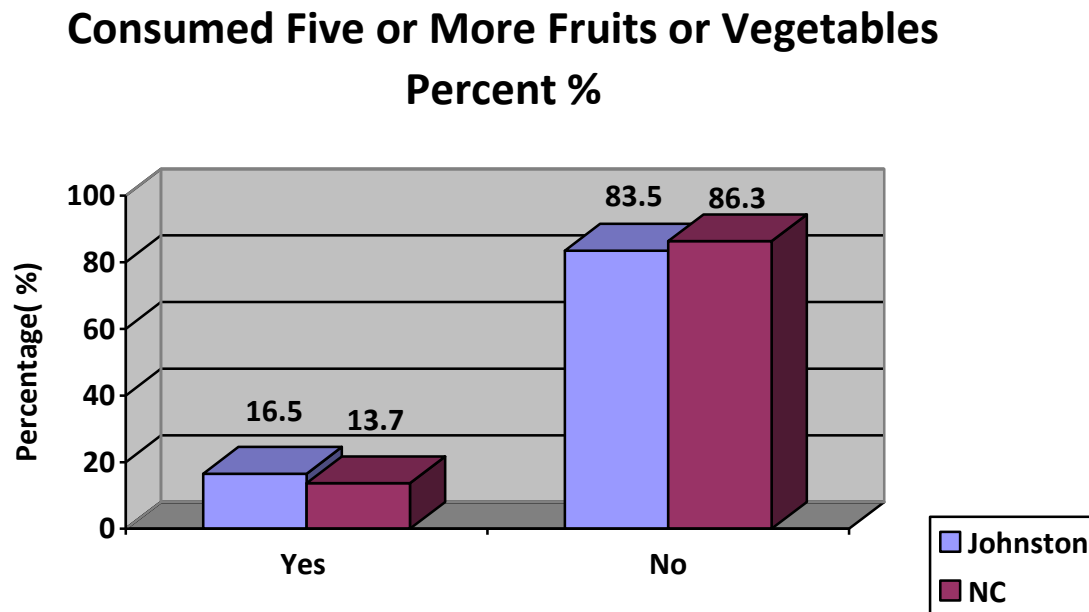


Chart Source: North Carolina State Center for Health Statistics. Behavior Risk Factor Surveillance System, Fruits and Vegetables 2011. Retrieved on December 11, 2014 from [http://www.schs.state.nc.us/schs/brfss/2011/nc/nccr/DAILY\\_5.html](http://www.schs.state.nc.us/schs/brfss/2011/nc/nccr/DAILY_5.html)

### Johnston County Food and Nutrition Services (January)

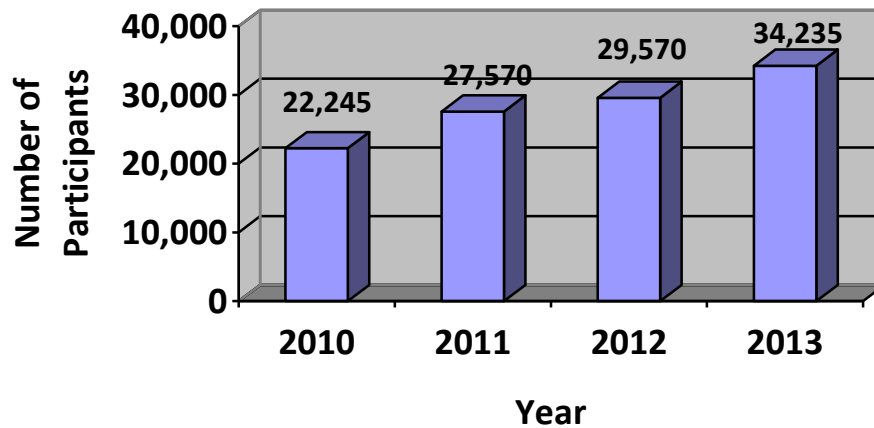


Chart Source: North Carolina Division of Social Services. Food and Nutrition Services.  
Retrieved on December 12, 2014 from <http://www.ncdhhs.gov/dss/stats/fsp.htm>

## Appendix DDD-The Fifty-Sixth Appendix

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### North Carolina County Monthly Unemployment Rate (2014) Not Seasonally Adjusted

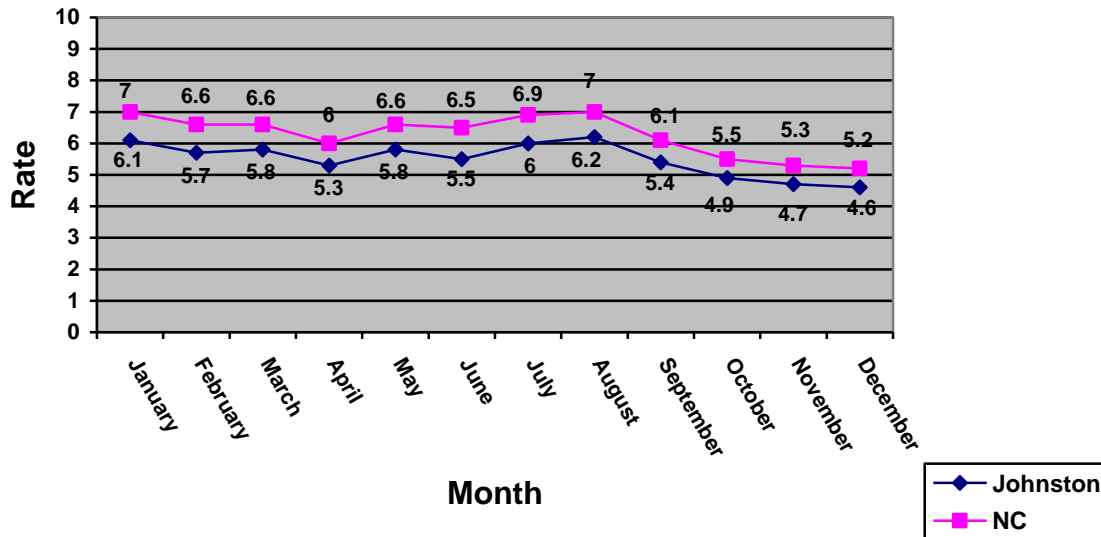


Chart Source: North Carolina Department of Commerce. Unemployment Rate.  
Retrieved on February 23, 2015 from <http://www.ncdhhs.gov/dss/stats/fsp.htm>

**Percent of Vehicles Available in Occupied Units (2009-2013)**

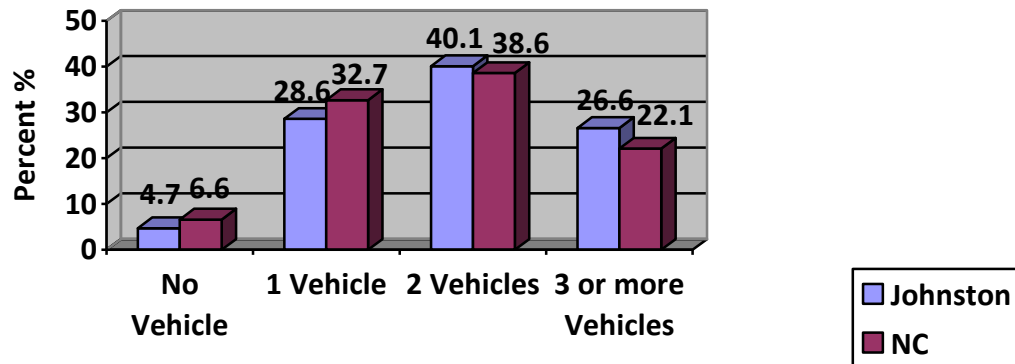


Chart Source: US Census Bureau. Housing Characteristics, 2009-2013 American Community Survey 5-Year Estimates. Retrieved on December 11, 2014 from <http://quickfacts.census.gov/qfd/states/37/37101lk.html>

## Appendix FFF-The Fifty-Eighth Appendix

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### Johnston County and NC Percentage of population asked if they ever had a mammogram (2010)

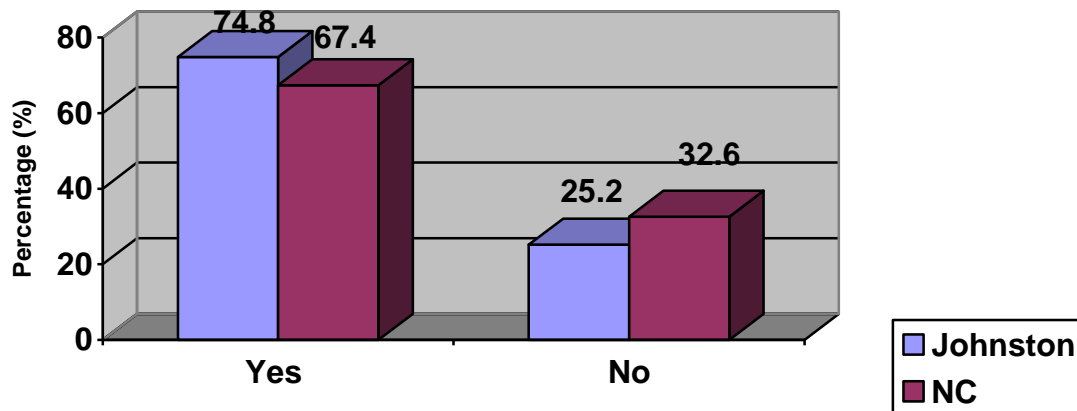


Chart Source: North Carolina State Center for Health Statistics. Behavior Risk Factor Surveillance System, Women's Health 2010. Retrieved on December 19, 2014 from <http://www.schs.state.nc.us/schs/brfss/2010/john/hadmam.html>

**Johnston County and NC Percentage of male (40+)  
population asked if they ever had a Prostate-  
Specific Antigen Test (2010)**

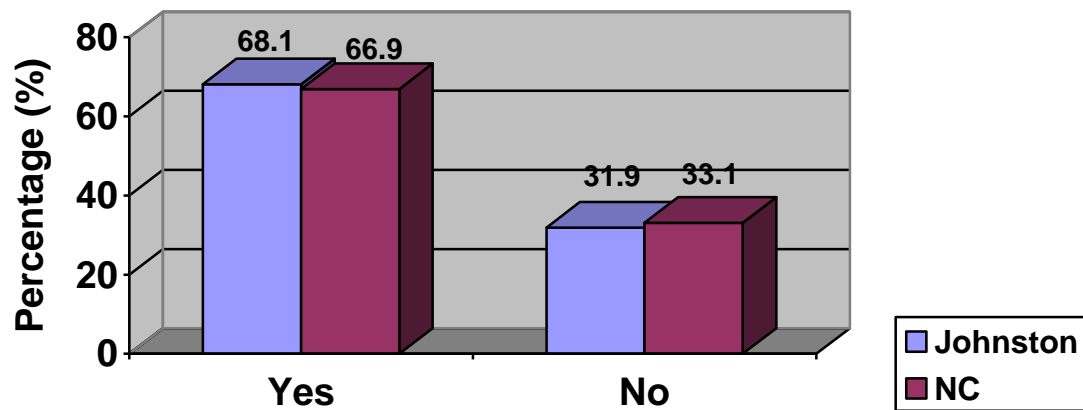


Chart Source: North Carolina State Center for Health Statistics. Behavior Risk Factor Surveillance System, Prostate Cancer Screening, 2010. Retrieved on December 19, 2014 from <http://www.schs.state.nc.us/schs/brfss/2010/john/psatest.html>



**Johnston County and NC Percentage of the  
population (Age 50+) asked if they ever had a  
Sigmoidoscopy and colonoscopy (2010)**

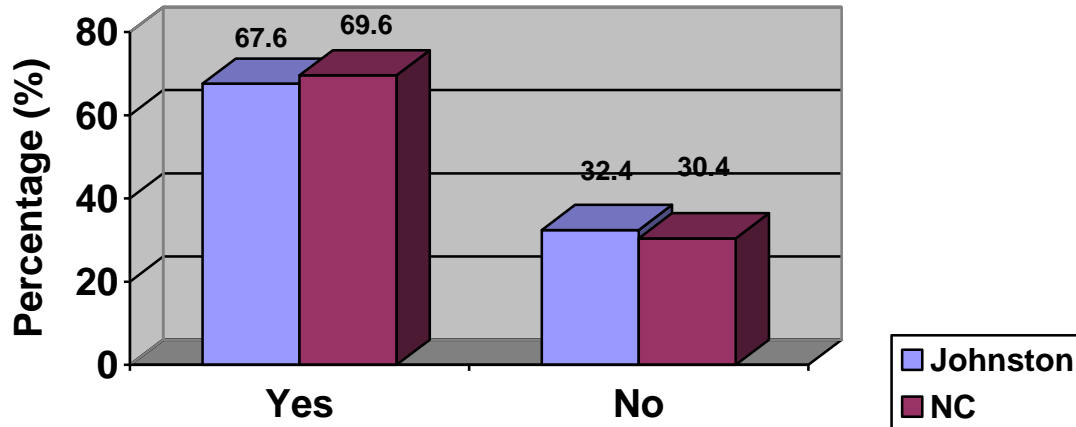


Chart Source: North Carolina State Center for Health Statistics. Behavior Risk Factor Surveillance System, Colorectal Cancer Screening 2010. Retrieved on December 19, 2014 from <http://www.schs.state.nc.us/schs/brfss/2010/john/hadsigm3.html>

### Appendix III-The Sixty-First Appendix

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<b>Johnston County Reportable Crashes on Publicly Maintained Roads</b>				
	<b>Type of Crash</b>	<b>No alcohol involved</b>	<b>Alcohol involved</b>	<b>Total Crashes</b>
<b>2010</b>	Property Damage Only	2,289	82	2,371
	Fatal	18	8	26
	Non-fatal injury	946	110	1,056
	Total	3,253	200	3,453
<b>2011</b>	Property Damage Only	2,214	88	2,302
	Fatal	18	10	28
	Non-fatal injury	991	115	1,106
	Total	3,223	213	3,436
<b>2012</b>	Property Damage Only	2,202	94	2,296
	Fatal	18	11	29
	Non-fatal injury	1,012	120	1,132
	Total	3,232	225	3,457
<b>2013</b>	Property Damage Only	2,407	109	2,516
	Fatal	18	5	23
	Non-fatal injury	1,146	110	1,256
	Total	3,571	224	3,795
<b>All Years</b>	Property Damage Only	9,112	373	9,485
	Fatal	72	34	106
	Non-fatal injury	4,095	455	4,550
	Total	13,279	862	14,141

Source: North Carolina Crash Data. Retrieved on February 23, 2015 from <http://nccrashdata.hsrc.unc.edu/output.cfm>

**Wake AHEC seatbelt use while driving or riding in  
car**

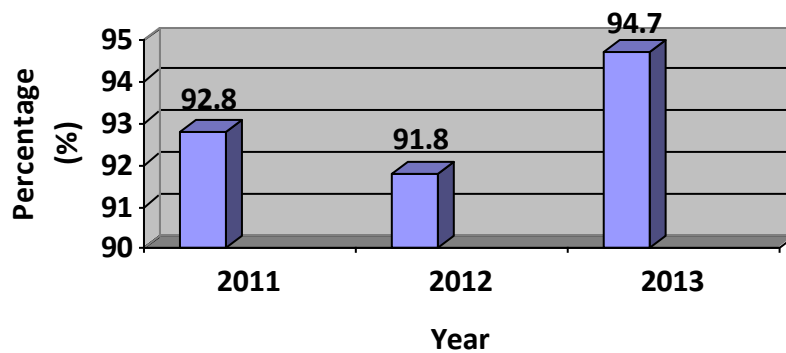


Chart Source: North Carolina State Center for Health Statistics. Behavior Risk Factor Surveillance System, Seatbelt Use 2011-2013. Retrieved on February 23, 2015 from <http://www.schs.state.nc.us/schs/brfss/2011/nc/nccr/seatbelt.html>

## Appendix KKK-The Sixty-Third Appendix

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Johnston County Number of Induced Abortions		
	10-14	15-19
2010	4	60
2011	0	44
2012	0	39
2013	2	45

Source: North Carolina State Center for Health Statistics. NC Reported Pregnancies.  
Retrieved January 14, 2014 from <http://www.schs.state.nc.us/data/vital.cfm>

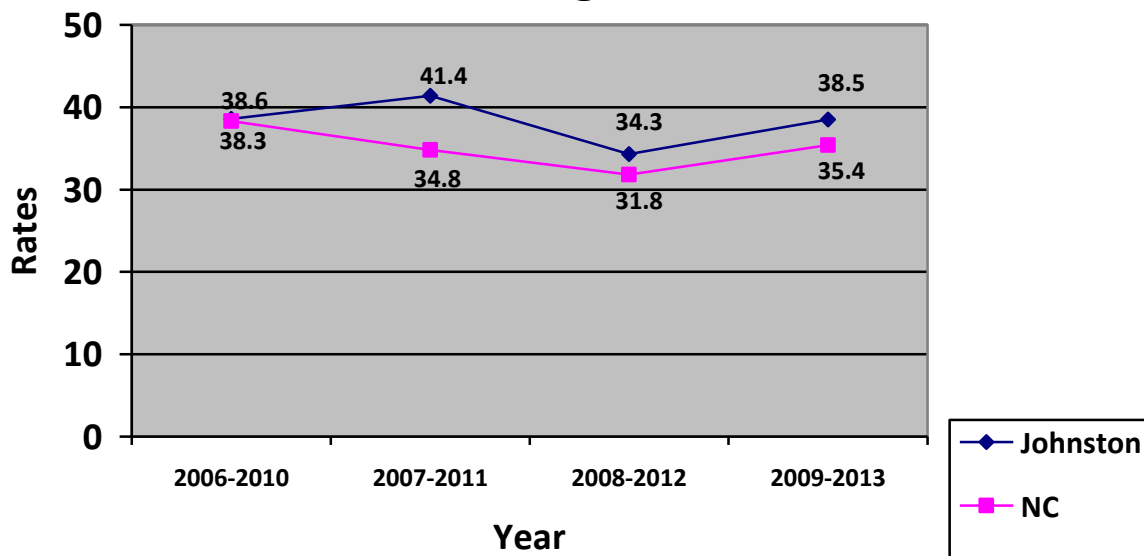
## Appendix LLL-The Sixty Fourth Appendix

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Johnston County Number of Live Births		
	10-14	15-19
2010	10	215
2011	2	236
2012	3	194
2013	2	179

Source: North Carolina State Center for Health Statistics. NC Reported Pregnancies.  
Retrieved January 14, 2014 from <http://www.schs.state.nc.us/data/vital.cfm>

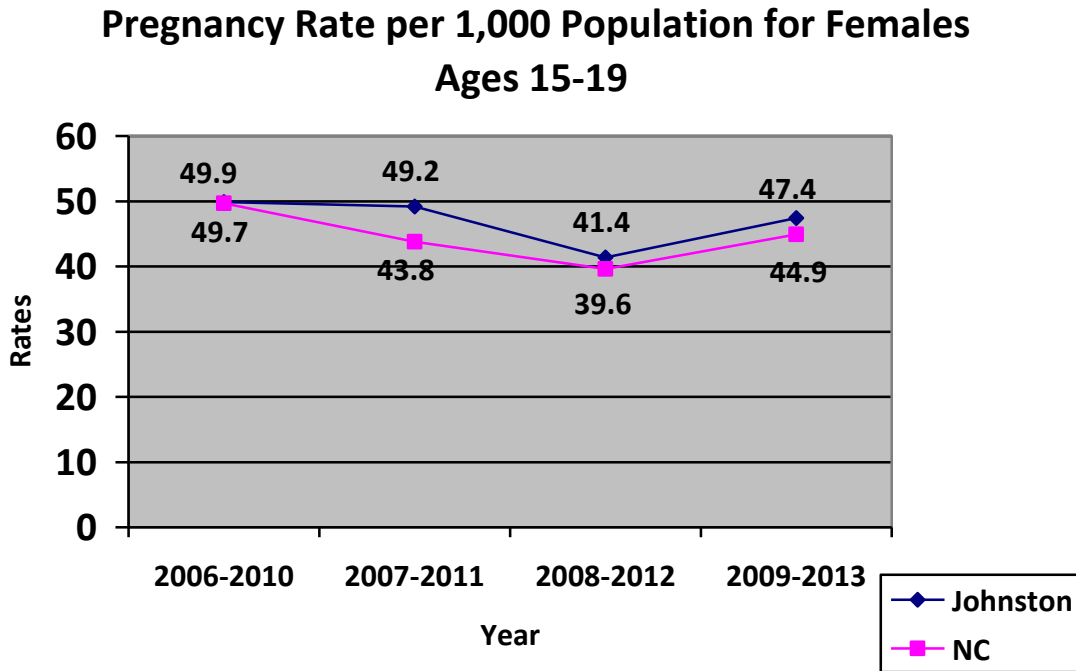
## Fertility Rate per 1,000 Population for Females Ages 15-19



Source: North Carolina State Center for Health Statistics. County Health Data Book, Fertility Rates. Retrieved January 14, 2014 from <http://www.schs.state.nc.us/data/databook/>

## Appendix NNN-The Sixty-Six Appendix

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Source: North Carolina State Center for Health Statistics. County Health Data Book, Pregnancy Rates. Retrieved January 14, 2014 from <http://www.schs.state.nc.us/data/databook/>

## Appendix OOO-Sixty Seventh Appendix: Community Resources

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**AGENCY NAME:** The Arc of Johnston County, N.C., Inc.

**ADDRESS:**

P.O. Box 1268

Clayton, NC 27528

**PHONE:** (919) 912-2111

**FAX** NONE

**WEB ADDRESS:** <http://www.arcjcnc.org>

**CONTACT PERSON:** Jason Phipps

**TITLE:** Chapter President

**E-mail:** [arcjcnc@yahoo.com](mailto:arcjcnc@yahoo.com)

**SERVICES/PROGRAMS PROVIDED:**

**Currently at the Local level, provide a community resource as to where to apply or obtain services and contact information of other community organizations.**

**REFERRAL PROCESS:** None – Approachable through our website, telephone, or The Arc of NC.

**AGES SERVED:** All ages

**HOURS:** No set hours, volunteer chapter, current members have full time jobs outside of the Arc.



**ADMISSIONS / ELIGIBILITY:** Anyone with an Intellectual/Developmental Disability diagnosis

**BILLING ARRANGEMENTS:** Currently N/A

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

Not at the local level – Only at the State Level [www.arcnc.org](http://www.arcnc.org) by request.

## Cooperative Extension Service

ADDRESS: 2736 NC 210 Highway, Smithfield, NC 27597

PHONE: 919-989-5380 FAX: 919-934-2698 WEB ADDRESS:

[www.ces.ncsu.edu/johnston](http://www.ces.ncsu.edu/johnston)

### CONTACT PERSONS:

Jayne McBurney, Family & Consumer Sciences Agent, [jayne\\_mcburney@ncsu.edu](mailto:jayne_mcburney@ncsu.edu)

Housing, Human Development and Family Resource Management (Financial and Energy)

Debbie Stroud, Family & Consumer Sciences Agent, [debra\\_stroud@ncsu.edu](mailto:debra_stroud@ncsu.edu)

Nutrition, Health and Wellness, and Food Safety, SHIP Coordinator

### SERVICES/PROGRAMS PROVIDED:

Our mission and our work are dedicated to improving the quality of people's lives. We rely on research-based information to develop educational programs based on the issues and the needs of our communities and citizens.

Programming available in Agriculture, Youth Development, Horticulture, and Family and Consumer Sciences. We have active Extension & Community Association, 4-H, Master Gardeners and Bee Keeping groups.

HOURS: 8 a.m. – 5 p.m. Monday thru Friday, holidays excepted

REFERRAL PROCESS, AGES SERVED, ADMISSIONS / ELIGIBILITY: none

North Carolina State University and North Carolina A&T State University commit themselves to positive action to secure equal opportunity regardless of race, color, creed, national origin, religion, sex, age, or disability. In addition, the two Universities welcome all persons without regard to sexual orientation. North Carolina State University, North Carolina A&T State University, U.S. Department of Agriculture, and local governments cooperating.

**BILLING ARRANGEMENTS:** service agency, most programs are low to no cost.

**SPECIAL HIGHLIGHTS / OTHER INFORMATION:** Mold testing and pest identification available for \$20. Soil testing for pH level and fertilizer needed is free.

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

Many publications are available in Spanish. We have a bilingual program staff.

Persons with disabilities and persons with limited English proficiency may request accommodations to participate by contacting Bryant M. Spivey, County Extension Director at (919)989-5380, or in person at the Johnston County Extension Office at least 10 days prior to the event.

**AGENCY NAME:** Community Connections Healthcare Services

**ADDRESS:** 282 West Millbrook Rd

**PHONE:** 919-783-8080

**FAX:** 919-544-1661

**WEB ADDRESS:** [www.cchs-nc.com](http://www.cchs-nc.com)

**CONTACT PERSON:** Allesha McKoy

**TITLE:** Executive Director

**E-mail:** [amckoy@cchs-nc.com](mailto:amckoy@cchs-nc.com)

**SERVICES/PROGRAMS PROVIDED:**

**Outpatient Therapy, Psychiatric Evaluations, Medication Management, Targeted Case Management- IDD**

**REFERRAL PROCESS:** Call the office at 919-783-8080 and Referral Specialist will take the information. Or you can visit our website at [www.cchs-nc.com](http://www.cchs-nc.com) and click on “referral button” the information is sent to a referral specialist who will get back to you promptly.

**AGES SERVED:** 3 and up

**HOURS:** M-F 9-7 and Saturday’s and Sunday’s by appt only.

**ADMISSIONS / ELIGIBILITY:** A Comprehensive Clinical Assessment will be done by a licensed professional to see if you qualify for services.

**BILLING ARRANGEMENTS: Accepts: Medicaid, Medicare, Tricare, BCBS, Medcost, Inclusive**

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

We have an bilingual therapist on staff (PRN)

**AGENCY NAME:** Community Alternatives

**ADDRESS:** 805 Tiffany Blvd Rocky Mount, NC 27804

**PHONE:** 252-200-5044

**FAX** 252-446-2820

**WEB ADDRESS:** [www.rescare.com](http://www.rescare.com)

**CONTACT PERSON:** Michele Cherry

**TITLE:** Executive Director

**E-mail:** [mcherry@rescare.com](mailto:mcherry@rescare.com)

**SERVICES/PROGRAMS PROVIDED:** CAP residential and periodic services,  
Alternative Family Living (AFL) and respite

**REFERRAL PROCESS:** Contact via telephone or email and we will schedule an intake  
appointment.

**AGES SERVED:** All Ages

**HOURS:** 8:30 am – 5:00 pm

**ADMISSIONS / ELIGIBILITY:**

**BILLING ARRANGEMENTS:** Medicaid or Self-pay

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

Available upon request

**AGENCY NAME:** Divine Destiny Adult Care Incorporated

**ADDRESS:** 612 Powell Street, Smithfield, NC 27577

**PHONE:** 919-934-7144

**FAX** 919-934-1370

**WEB ADDRESS:** [www.divine-destiny.org](http://www.divine-destiny.org)

**CONTACT PERSON:** Kathy Greenwood

**TITLE:** Program Director

**E-mail:** [Kathy@divine-destiny.org](mailto:Kathy@divine-destiny.org)

**SERVICES/PROGRAMS PROVIDED:** Providing State Regulated Adult Day Health Care Services with professional staff for adults (age 18 and older) with chronic conditions. These supervised services will allow seniors, disabled adults and our Veterans to remain in their own homes and give their Caregiver a much needed break. Some services include: Memory impairment program, visually impaired program, diabetic care program, falls management program, health care services (coordinated with personal physicians), assistance with mobility, assistance with feeding, transportation (contracted service), beautiful safe enclosed garden, caregiver support services, mild memory support services, pet therapy, music therapy, aroma therapy, reminiscence therapy, level-specific physical and memory activities throughout the day.

**REFERRAL PROCESS:** Some of the current referrals include: Doctor Offices, Department of Social Services, Disabled Veterans Administration, Johnston County Industries, Johnston Health Hospital, Health Department, Case managers, Home Health Agencies, Community and Senior Services. You do not have to be a professional agency to make a referral to Divine Destiny Adult Care Inc., however, all referrals must go directly to the Program Director.



**AGES SERVED:** Adults ages 18 and older

**HOURS:** Monday through Friday 8:00 – 4:30 (*with extended hours available*)

**ADMISSIONS / ELIGIBILITY:** On-site assessment by “Team” to include: Participant (*if applicable*) Registered Nurse (*on staff*), Activity Coordinator, Program Director and Caregivers, to ensure we meet all of the needs to develop the full Plan of Care.

**BILLING ARRANGEMENTS:** Medicaid Cap DA, State Funding, First In Families, Family Caregiver Support Services, Disabled Veterans Program – This service is handled on-site (*see Program Director for details*)

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

Staff members will communicate and provide written material as requested

**AGENCY NAME:** Divine Destiny Adult Care Incorporated

**ADDRESS:** 612 Powell Street, Smithfield, NC 27577

**PHONE:** 919-934-7144

**FAX** 919-934-1370

**WEB ADDRESS:** [www.divine-destiny.org](http://www.divine-destiny.org)

**CONTACT PERSON:** Kathy Greenwood

**TITLE:** Program Director

**E-mail:** [Kathy@divine-destiny.org](mailto:Kathy@divine-destiny.org)

**SERVICES/PROGRAMS PROVIDED:** Providing State Regulated Adult Day Health Care Services with professional staff for adults (age 18 and older) with chronic conditions. These supervised services will allow seniors, disabled adults and our Veterans to remain in their own homes and give their Caregiver a much needed break. Some services include: Memory impairment program, visually impaired program, diabetic care program, falls management program, health care services (coordinated with personal physicians), assistance with mobility, assistance with feeding, transportation (contracted service), beautiful safe enclosed garden, caregiver support services, mild memory support services, pet therapy, music therapy, aroma therapy, reminiscence therapy, level-specific physical and memory activities throughout the day.

**REFERRAL PROCESS:** Some of the current referrals include: Doctor Offices, Department of Social Services, Disabled Veterans Administration, Johnston County Industries, Johnston Health Hospital, Health Department, Case managers, Home Health Agencies, Community and Senior Services. You do not have to be a professional agency to make a referral to Divine Destiny Adult Care Inc., however, all referrals must go directly to the Program Director.

**AGES SERVED:** Adults ages 18 and older

**HOURS:** Monday through Friday 8:00 – 4:30 (*with extended hours available*)

Johnston County Department of Social Services

Director:

G. Earl Marett, M.S.W

Physical Address:

714 North Street

Smithfield, NC 27577

Mailing Address:

PO Box 911

Smithfield, NC 27577

Phone: 919-989-5300

Fax: 919-989-5324

**Agency: Johnston County Department of Social Services**

**Program: Medicaid for Adults and the Disabled**

**Address: 714 North Street Smithfield, NC 27577**

**Phone: 919-989-5300**

**Fax: 919-989-5324**

**Web Address: [www.johnstonnc.com](http://www.johnstonnc.com)**

**Contact Person: Betty Lou Bunn**

**Title: Income Maintenance Supervisor II**

**Email: [betty.bunn@johnstonnc.com](mailto:betty.bunn@johnstonnc.com)**

**Services Provided:**

Medicaid for adults pays for medical expenses for six (6) prescriptions per month, doctors, hospitals, dental and Medicare premiums. In order to qualify for adult Medicaid, one must be disabled or over age 65. There are several components in adult Medicaid:

- MAA B Medicaid for age 64 and over
- MAD B Medicaid for disabled individuals under 65
- MAB B Medicaid for the Blind

The above three components have a reserve limit of \$2,000. For one person and income at 100% of poverty level and a deductible is not allowed with this income level.

## **MAA, MAD and MAB**

### **Medicaid for Elderly or Disabled Individuals**

#### **Need help paying for prescriptions and other medical care?**

#### **Medicaid benefits include but are not limited to:**

- payment of Medicare premiums
- inpatient hospital care
- doctor's visits and clinical services
- outpatient hospital visits
- licensed home care services
- eyeglasses
- prescription medicine
- laboratory and x-ray services
- nursing and hospice care
- durable medical equipment, (e.g. walker)
- medically necessary ambulance transport
- dental care

#### **To be eligible, you must:**

- Be age 65 or older, OR under 65 and unable to work due to a severe disability that **is expected to last at least 12 months**
- Have monthly income no greater than \$867 for individuals or less than \$1,167 for couples  
Income Includes: · Social Security · Veterans Benefits · pensions and other retirement benefits · wages (some income can be disregarded)
- Resources must be no more than \$2,000 for an individual, or \$3,000 for a couple.  
Resources Include: · cash · bank accounts · second car · retirement accounts · stocks and bonds · real estate that is not your home  
Resources DO NOT INCLUDE your home, car, household furnishings, clothing or other personal effects such as jewelry.

### **Medicare-Aid for Help with Medicare Costs**

Need help paying your Medicare costs? Your Medicare-Aid Benefit depends on your monthly income.

If income is no more than:		Your Medicare-Aid Benefit is payment of:
Individual	Couple	
\$867	\$1,167	<ul style="list-style-type: none"> <li>• Part B premiums (\$96.40 per month)</li> <li>• Part A premiums (when applicable)</li> <li>• Medicare hospital deductible (\$1024)</li> <li>• Medicare annual deductible (\$135)</li> <li>• 20% Medicare co-payment</li> </ul>
\$1,040	\$1,400	<ul style="list-style-type: none"> <li>• Part B premiums (\$96.40 per month)</li> </ul>
\$1,170	\$1,575	<ul style="list-style-type: none"> <li>• Part B premiums (\$96.40 per month). Funds for this program may be limited.</li> </ul>

**Income includes** Social Security, Veterans Benefits, Pensions and other retirement benefits, and Wages (some income can be disregarded).

**Resources Include** cash, bank accounts, second car, retirement accounts, stocks and bonds, and real estate that is not your home. Your resources must be no more than **\$4,000** for an individual, or **\$6,000** for a couple. Resources **DO NOT INCLUDE** your home, car, household furnishings, clothing or other personal effects such as jewelry.

**Medicare-Aid only pays for services covered by Medicare. Therefore, it DOES NOT pay for prescriptions or eyeglasses.**

## Long Term Care

Medicaid for Long Term Care. Medicaid pays for medically necessary nursing home care for patients in skilled or intermediate care nursing homes or in intermediate care facilities for the mentally retarded. The patient's income must be less than the cost of care in the facility at the Medicaid rate, and there is a limit on resources. If the patient or his representative gives away assets or sells them for less than market value, he may be ineligible for payment of the cost of care. The sanction period is based upon the value of the assets transferred away.

## Financial Rules for Long Term Care Recipients

Medicaid pays for medically necessary nursing home care for patients in skilled or intermediate care nursing homes or in intermediate care facilities for the mentally retarded. The patient's income must be less than the cost of care in the facility at the Medicaid rate, and there is a limit on resources. If the patient or his representative gives

away assets or sells them for less than market value, he may be ineligible for payment of the cost of care. The sanction period is based upon the value of the assets transferred away.

## **Financial Protection for a Spouse**

Medicaid policy specifies that when a legally married individual needs Medicaid to help pay for nursing facility services, a portion of the couple's income and assets may be protected for the spouse at home, the community spouse. The following is a summary of spousal protection rules:

- Medical services: nursing home care, hospital care that exceeds 30 days, or services provided by the Community Alternatives Program (services which enable an individual to remain at home who would otherwise be institutionalized)
- The community spouse is allowed to keep one half of the couple's assets, with a minimum of \$20,880 and a maximum of \$104,440 (current as of 1/1/2008).
- The protected share is calculated by assessing the value of all assets owned separately or jointly by either spouse at the point the individual becomes institutionalized. The home site is generally not counted in determining the value of assets since the home site is protected for the spouse.
- The nursing facility spouse must spend his half of the assets on his care prior to becoming Medicaid eligible. A nursing home recipient is allowed a maximum of \$2,000 in assets.
- The protected assets, including the home site, must be transferred to the name of the community spouse.
- Once assets have been allocated following spousal impoverishment rules, and the spouse in the nursing facility is found eligible for Medicaid, spousal financial responsibility ends and each spouse will be treated separately for Medicaid purposes.
- A portion of a married institutionalized Medicaid recipient's income may also be allocated to the community spouse.
- Income is allocated for the needs of the community spouse if the community spouse's income is less than 150% of the poverty level (currently \$1,750). It is also possible to allocate additional income to the community spouse for excessive shelter costs.
- Income may also be allocated for the needs of other dependents.

## **Transfer of Assets**

Medicaid law prohibits the transfer of assets for less than market value by an institutionalized Medicaid applicant/recipient or anyone acting on their behalf.

- Certain transfers are allowable, such as the transfer of a home site to a spouse or disabled child.



- The look back period is 3 years (5 years for transfers to a trust) from the date of application or institutionalization, whichever occurs later.
- A sanction is applied for a period of time based on the value of the asset and begins the month the asset is transferred. The length of the sanction is determined by dividing the value of the transferred assets by the average monthly private cost for nursing home care (currently \$5,000). The sanction begins with the month of the transfer.
- During the sanction period the individual may be eligible for Medicaid but Medicaid will not pay for institutional services.

### **Estate Recovery**

- When a Medicaid recipient in a nursing home or receiving CAP services dies, Medicaid files a claim against the estate to recover expenses paid by Medicaid.
- Estate recovery is waived if there is a spouse or dependents who continue to live on the property, the total assets in the estate are less than \$5,000, Medicaid charges are less than \$3,000, or in cases of hardship.

### **Hours of operation are as follows:**

**Monday: 8:00 am – 6:00 pm**

**Tuesday – Friday: 8:00 am – 5:00 pm**

**Bilingual Services are available for all programs at Social Services**

**Agency: Johnston County Department of Social Services**

**Program: Adult Services**

**Address: 714 North Street Smithfield, NC 27577**

**Phone: 919-989-5300**

**Fax: 919-938-0192**

**Web Address: [www.johnstonnc.com](http://www.johnstonnc.com)**

**Contact Person: Debbie Henderson**

**Title: Adult Services Supervisor**

**Email: [debbie.henderson@johnstonnc.com](mailto:debbie.henderson@johnstonnc.com)**

**Services Provided:**

Johnston County Social Services provides services for the in-home care of elderly and disabled adults through the In-Home Aide Program and the Community Alternative Program For Adults (CAP-DA).

The need for an In-Home aide is determined by an assessment based on the services needed and the individual's eligibility for the service. If the needs of an individual can be met, he/she is assigned an aide and a service plan is developed in conjunction with the aide, the individual receiving the services, and the assigned Social Services case manager. The following criteria applies to the In-Home Aide Program:

- The individual to receive services must be over sixty (60) years old or disabled.
- The average schedule of care would be two (2) times per week for two (2) hours. This may vary depending on the amount of care needed.
- There are no income limitations for this service.
- There is no charge for this service. The program is operated on a cost sharing basis. That is, we ask for a donation based on the amount of time the aide is in the home and the client's income, but the service is not based on this. Donations are optional.
- The aides are not required to be certified nursing assistants but they have extensive training.
- The aides are supervised by the Home Health and Hospice (3HC).

**In-Home Aides may provide the following:**

- Assistance with basic home maintenance skills such as; housekeeping, laundry, and meal preparation.
- Assistance with shopping, errands, and basic budgeting if needed.
- Assistance with light personal care. Can assist with washing feet, back, or hair care, but cannot assist with full bathing.

To obtain additional information and/or apply for this service, please contact Johnston County Social Services at 919 989-5300. Ask for the Adult Services In-Home Aide Case Manager.

**CAP-DA**

The Community Alternatives Program for Disabled Adults (CAP-DA) provides services in the home to prevent nursing home placement. CAP-DA is a special Medicaid community care program. The same eligibility criteria as Medicaid applies as well as the requirement that the adult meet the skilled/intermediate level of care needs and be able to be safely cared for at home. Services include case management, nursing care, personal care services, mobility aids and respite care. CAP-DA clients can also receive Adult Day Health Care, Home Delivered Meals, and Telephone Alert Services.

To obtain additional information and/or apply for this service, please contact Johnston County Social Services at 919 989-5300. Ask for the CAP/DA Case Manager(s).

Johnston County Social Services provides services associated with the placement and care of elderly and disabled adults within Adult Day Care and Nursing Home facilities as follows:

**Adult Homes Specialist**

The Adult Homes Specialist is responsible for the routine monitoring of licensed Adult Care Home facilities in Johnston County according to G.S. 131D.-2(b)(1a) as follows:

1. Providing consultation and assistance for initial licensure, compliance with licensure rules, and renewal of licenses.
2. Providing assistance toward upgrading care and services.
3. Investigating complaints concerning violations of rules or the Resident's Bill of Rights.
4. Investigating unlicensed facilities.

Routine monitoring of facilities occurs at least once every two months, more often when violations are cited and corrective action is pending.

Inquiry regarding this service may be made directly to Johnston County Social Services at (919) 989-5300. Ask for the Adult Homes Specialist in the Adult Services Group.

### **Adult Care Home Case Management**

The purpose of this service is to assure that the needs of heavy care residents within Adult Care Homes are met. A case manager is assigned and is responsible for the following:

1. Verifying that the resident is eligible for Enhanced Care.
2. Reviewing the home's care plans to be sure that those plans correspond to the needs of the resident.
3. Reviewing the Adult Care Home's provision of services to assure that changes in resident's conditions are being addressed.

The resident must be seen personally by the case manager as often as is necessary to conduct a thorough assessment in the areas of physical health, mental health, social support system, activities of daily living, economic and financial circumstances, and environment. The resident, family members, adult care home, and other responsible parties must be involved in developing a services plan to meet the needs of the resident. Monthly contact with the facility staff, the resident, or other responsible parties for at least two (2) hours per client must be done to assure that adequate care is being provided. At least quarterly, the case manager must meet with the staff and resident in person to review the service plan and annually a more extensive reevaluation must be done.

All activities related to the provision of this service are funded through Medicaid. Inquiry regarding this service may be made directly to Johnston County Social Services at (919) 989-5300. Ask for the Adult Services Group.

### **Adult Care Home and Nursing Home Financial Assistance**

Inquiries regarding this service may be made directly to Johnston County Social Services at (919) 989-5300. Ask for the Adult Placement Case Manager. Also see Adult Medicaid for Long-Term Care.

## **Adult Placement Services**

Adult Placement Services are the means by which social workers help individuals and their families determine whether placement in an Adult Care Home can be prevented or is the most desirable option. If placement is the option chosen, Adult Placement Services assist in making the arrangements for the move and following up after placement to assist with any adjustment problems. This may include counseling, advocacy, and arranging for supportive services. Typically, these services may include:

1. Providing information and general counseling to the family or individual.
2. Assistance with medical evaluations and associated paperwork.
3. Review and evaluation of the clients financial situation to determine the payment source (eligibility for Medicaid, etc...).
4. Review of licensed Adult Care facilities and assistance in selecting a facility. The facility may be located in any county in North Carolina.
5. General assistance, support, and follow up throughout the placement process.

Adult Placement Services are mandated through the North Carolina Social Services Block Grant Plan. Inquiry regarding this service may be made directly to Johnston County Social Services at (919) 989-5300. Ask for the Adult Placement Case Manager. Adult Day Care: Adult Day Care centers provide day activities in a protective setting for disabled and elderly adults. The Adult Day Care Case Manager is involved in determining the eligibility for Day Care recipients who need assistance in order to attend Day Care.

Adult Day Care centers are also monitored through Johnston County Social Services to ensure compliance with licensure laws and to investigate any complaints of non-compliance with the rules.

Inquiry regarding this service may be made directly to Johnston County Social Services at (919) 989-5300. Ask for the Adult Day Care Case Manager.

## **Protective Services for Disabled Adults**

The law requires anyone having reasonable cause to believe that a disabled adult is in need of protective services to report such information to Social Services. Protective services are applicable when the following allegations are made:

1. The person is a disabled adult.
2. The person is abused, neglected or exploited.
3. The person is in need of protection.

Johnston County Social Services provides services, as required by North Carolina General Statutes, to perform certain activities for disabled adults when the above allegations have been made.

Evaluations can be conducted without the adult's consent; however, if services are needed, these cannot be provided without the consent of the adult or a Court Order.

Adult Protective Services often involves other agencies/facilities in arranging services in order to protect the adult. The services can also be provided for out-of-county residents if they are in a Adult Care facility in Johnston County.

To obtain additional information or report adult abuse, please contact Johnston County Social Services at (919) 989-5300. Ask for the Adult Protective Services Case Manager, the Adult Services Supervisor, or the Adult Services Intake Worker

Hours of operation are as follows:

**Monday: 8:00 am – 6:00 pm**

**Tuesday – Friday: 8:00 am – 5:00 pm**

***Bilingual services are available for all programs at Social Services***

**Agency: Johnston County Department of Social Services**

**Program: Child Services**

**Address: 714 North Street Smithfield, NC 27577**

**Phone: 919-989-5300**

**Fax: 919-934-5235**

**Web Address: [www.johnstonnc.com](http://www.johnstonnc.com)**

**Contact Person: Denise Boyette**

**Title: Child Services Program Manager**

**Email: [denise.boyette@johnstonnc.com](mailto:denise.boyette@johnstonnc.com)**

**Services Provided:**

***Child Protective Services***

**[What you Need to Know about Child Abuse and Neglect.](#)**

The Child Protective Services program strives to ensure safe, permanent, nurturing families for children by protecting them from abuse and neglect while attempting to preserve the family unit.

Child Protective Services help prevent further harm to children from intentional physical or mental injury, sexual abuse, exploitation, or neglect by a person responsible for a child's health or welfare.

Child Protective Services also help protect children who have no parent, guardian, or custodian to provide care and supervision, or whose parents or guardians or custodian is unable to provide for the care or supervision and lacks an appropriate alternative child care arrangement.

Social services staff accomplishes all these services through:

- Assessing suspected cases of abuse and neglect
- Assisting the family in diagnosing the problem
- Providing in-home counseling and supportive services to help children stay at home with their families
- Coordinating community and agency services for the family
- Petitioning the court for removal of the child, if necessary
- Providing public information about child abuse, neglect, and dependency

North Carolina has been able to support selective initiatives for the prevention of child abuse and neglect. These initiatives provide support for families and strive towards goals of reducing risks to children, improving parenting skills, and strengthening social support networks for families. In addition, certain initiatives seek to bring together national, state, and local experts to address issues of child abuse and neglect in efforts to educate the general public and for professional development. This service is provided in all 100 counties.

Citizens who suspect that a child is being abused or neglected should contact their local [county Department of Social Services](#).

### ***Child Placement Services for Children***

We believe our foster children deserve safe, permanent, nurturing homes within one year of initial placement. To achieve this, it is vital for every foster child in North Carolina to have one single, stable foster care placement within his own community. The average foster child in North Carolina is 10 years old, and will be in the custody, or placement authority, of a [County Department of Social Services](#) for just over 1 year before attaining permanency. During this time he will probably change placements at least 1 time. A statewide effort to reduce the length of stay in foster care has resulted in a 28-month drop since 1982. Each of North Carolina's 100 counties continues to strive towards obtaining permanency for foster children by providing Child Placement Services to children who need temporary homes. These services include:

- Providing temporary homes for children in DSS custody
- Supervising children in foster care



- Providing ongoing counseling and support services to help families and children reunite and stay together
- Providing extra counseling and support for families and foster parents of children who are ill, disabled or delinquent
- Petitioning the court for legal termination of parental rights
- Making recommendations for adoption for children unable to return home
- Recruiting, screening, training potential foster parents, performing home studies, performing local criminal background checks to ensure the safety of potential foster children placed in the home, and recommending licensure of the home.

For more information on placement arrangements please visit our [Adoptions](#) or [Foster Care Program](#) pages.

### ***Adoption Services***

Some foster children will never go back to their birth family. We are committed to the principle that every one of these children deserves a "forever family". We have the firm belief that a safe, permanent, and nurturing home can be found for any child who needs one. We also firmly believe that we are responsible for enabling this. Adoption Services are designed to find permanent homes for children and to provide support to the families who adopt them.

Children waiting for adoption include:

- Children with special needs, such as physical, mental, and emotional disabilities
- Sibling groups and teenagers
- Minority children, especially African American males

Many children available for adoption are eligible for monthly maintenance payments, medical benefits, and other services. Adoption Assistance is available for all children whose status and special needs meet certain criteria. Children who are considered special needs include children with physical, mental, developmental, and emotional disabilities as well as sibling groups, older children, and children of color. The child's Department of Social Services determines individual eligibility based on specific criteria. The agency then negotiates with adoptive parents to meet needs through an adoption assistance agreement.

The monthly adoption assistance payment in North Carolina is computed on a graduated level based on the age of the child. Most of North Carolina's 100 local [county Departments of Social Services](#) have raised their rates to the following payment structure:

\$390.00 for children 0-5

\$440.00 for children 6-12  
\$490.00 for children 13-18

Supplemental adoption assistance payments for HIV positive children are also available and are set at the following level:

\$800.00 per month/child with indeterminate HIV status  
\$1000.00 per month/child confirmed HIV-infected, asymptomatic  
\$1200.00 per month/child confirmed HIV-infected, symptomatic  
\$1600.00 per month/child terminally ill with complex care needs

North Carolina, as do most states, utilizes an exchange program that serves to connect children needing homes to families wanting to adopt. The exchange employs a variety of methods to connect children and families including a [Photo Adoption Listing Service \(PALS\)](#) book and [web site](#). These are used to circulate pictures and descriptions of children, allowing a family to identify, with its agency, the child whose needs will be best met as part of their family. The PALS books can be found in all 100 county Departments of Social Services, some public libraries and other agencies, and institutions with high visibility and use. Many of the foster children available for adoption are on the web site. It may be accessed by clicking of the [Foster Child Adoption](#) link, or from any internet - connected computer at the following address:  
<http://www.ncdhhs.gov/dss/adopt/aboutadoption.html>.

If you would like more information about Adoption Services in North Carolina, contact the NC Kids Adoption and Foster Care Network at 1-877 NCKIDS-1 (1-877-625-4371). You may also contact your [local county Department of Social Services](#).

For additional information on efforts being made to find permanent homes for children, please feel free to complete our [information form](#) or go to the [Foster Child Adoption](#) web site.

## [Questions and Answers](#)

### ***What is Foster Care?***

Foster care is a temporary living arrangement for abused, neglected, and dependent children who need a safe place to live when their parents or another relative cannot take care of them. Often their families face issues such as illness, alcohol or drug addiction, or homelessness.

When the [county Department of Social Services](#) (DSS) believes a child is not safe, and a judge agrees, DSS takes custody of that child and finds a foster home for him or her. Length of stay in foster care varies from a few days to much longer.

Foster families are recruited, trained and licensed to care for abused and neglected children temporarily, while their parents work with social work professionals to resolve their family issues. Relatives may be licensed as foster parents.

The foster family, DSS and the birth family work together to return children to their own homes as quickly as possible. In cases where the child becomes free for adoption, foster parents may be considered as adoptive parents.

### **Who Are the Children?**

Thousands of children in North Carolina enter the foster care system each year, and range in age from infants to 18 years old. All foster children have unique backgrounds, experiences, personalities, strengths and needs.

Some children in foster care require extensive care for physical or emotional handicaps and disabilities.

Some also require help with undisciplined and delinquent behaviors. Most foster children do not have a strong sense of belonging or self-worth. Many have been victims of physical or sexual abuse. All children who are in foster care require special care, support and nurturing.

### **Who Pays For The Child's Care?**

Foster parents receive financial compensation from the placement agency or a child's room, board, and other living expenses. Sometimes there are supplemental payments for the care of children with special needs.

Although the amount of the financial compensation payments may vary from agency to agency and sometimes based on the individual needs of the foster child, the current state recommended rates are as follows:

- \$390 for children ages 0 - 5
- \$440 for children ages 6 - 12
- \$490 for children ages 13 and over

### **Who can be a Foster Parent?**

Foster parents must:

- Be at least 21 years old
- Have a stable home and income
- Be willing to be finger printed and have a criminal records check
- Maintain a drug free environment
- Complete all required training and be licensed by the state of North Carolina

To find out more on how to become a licensed foster parent you can visit our [Licensing web page](#), call NC KIDS at 1-877-NCKIDS (1-877-625-4371) or contact your local [County Department of Social Services](#). Your local County Department of Social Services can offer information that will help you decide if foster parenting is right for you.

### **Do Foster Parents have to be Licensed?**

Yes, North Carolina state law requires that all foster parents be licensed to care for children in their care. These licenses are issued by the N.C. Department of Health and Human Services. County Departments of Social Services and several private child caring agencies are authorized to work with potential foster parents to assist them with the [licensing process](#) and to provide supervision and support for the foster parents.

Potential foster parents receive 30 hours of training. The training covers topics such as child abuse and neglect, working with birth parents, and helping foster children deal with the issues they face. It also helps the potential foster parents think about how parenting another child may affect their family.

### **How Do I Become a Foster Parent?**

To find out more on how to become a licensed foster parent you can visit our [Licensing web page](#), call NC KIDS at 1-877-NCKIDS (1-877-625-4371) or contact your local [County Department of Social Services](#). Your local County Department of Social Services can offer information that will help you decide if foster parenting is right for you.

### **NC LINKS** ***Helping Teens Make a Successful Transition from Foster Care to Self-Sufficiency***

***The name of the North Carolina Foster Care Independence Program, NC LINKS, is not an acronym and therefore doesn't "stand" for anything. Instead, it is a word that captures the purposes and intent of the John Chafee Foster Care Independence Act: <http://www.nrcys.ou.edu/yd/programs/pdfs/hr3443.pdf>***

...to build a network of relevant services with youth so that they will have ongoing connections with family, friends, mentors, the community, employment, education, financial assistance, skills training, and other resources to facilitate the transition to adulthood.

Older youth and young adults who have experienced extended time in foster care are at increased risk of negative consequences once they leave care, such as dropping out of school, unplanned parenthood, high rates of untreated illness, homelessness, criminal activity, depression and suicide. In order to help these youth and young adults have better outcomes, the NC LINKS program provides services and resources to all youth in foster care age 16 to 18 and to those young adults who are voluntarily in care between the ages of 18 and 21, as well as to young adults who aged out of foster care at age 18. For the purposes of this policy, “foster care” means that the youth was in DSS custody as a minor and lived either in a licensed foster care facility or lived with a relative (not the removal home.) County Departments of Social Services are required to offer LINKS services to these two populations if they have eligible youth or young adults who are or were in their custody. Counties are encouraged to provide services to youth in foster care ages 13 through 15 and to youth and young adults who were discharged from their custody as teens but prior to their 18<sup>th</sup> birthday.

In order for a youth or young adult to receive LINKS services or funding, he or she must be a willing and active participant in the assessment, planning, and service implementation processes. Youth and young adults who refuse services may later change their minds so long as they are eligible.

The NC LINKS program is comprised of several elements:

1. An **assessment** of the youth's strengths as well as their needs for further information and training. The assessment is completed by the youth and his or her caregiver.
2. A **plan** that is based on the assessment and which includes the youth/young adult's interests and goals as well as their responsibilities for fulfilling the plan.
3. **Services** outlined in the plan which are directed helping the youth or young adult to achieve positive outcomes. Desired outcomes for all young adults exiting the foster care system are:
  - Sufficient income to meet daily needs;
  - A safe and stable place to live
  - Sufficient academic and/or vocational training that is in keeping with the youth's goals, interests and abilities
  - Connections to and emotional support from a variety of adults outside of the public child welfare system
  - Avoidance of High Risk Behaviors
  - Postponement of parenthood until emotionally and financially capable of parenting
  - Access to routine mental health, health and dental health care
  - Services are individualized but usually include group activities; participation in community activities that promote maturity; one-on-one instruction; volunteer activities; employment; specific life skills training; exposure to educational and vocational resources, etc.
4. Funding is provided to each county Department of Social Services for program operations, based on the number of eligible youth and young adults served by

the county. In addition, limited funding is available to reimburse county Departments of Social Services for expenditures made on behalf of individual youth and young adults that help to fulfill the purposes of the program.

Undocumented alien youth/young adults and youth/young adults with personal reserves in excess of \$10,000 are not eligible for LINKS funds nor services provided through the use of LINKS funds. Ineligible youths may participate so long as their participation does not require the use of additional LINKS funds and so long as no LINKS-eligible youth are denied services due to their participation.

If you or someone you know needs this service, please contact your [county Department of Social Services](#).

### ***Adolescent Parenting Program***

The Division of Social Services envisions a system of community based support for families that will promote their ability to cope with difficult situations and resolve family problems. This helps us complete our mission of ensuring that every child in North Carolina has a safe, permanent, nurturing home. We have established a collaborative relationship with the Division of Public Health to accomplish our mutual missions. One effort that has proven to be effective in ensuring the safety of children is the Adolescent Pregnancy Prevention Program (APP). It is a secondary pregnancy prevention program available to teen-agers 17 years or younger who are either parents for the first time or are pregnant. The program is designed to strengthen preventive services to adolescent parents at the county level. The program uses broad-based approaches encompassing social services, mental and public health, and volunteer and community support.

The program targets teens experiencing problems that negatively affect their ability to function appropriately as a parent, and are at risk for experiencing one or more of the following conditions:

- Separation from family
- Interruption of schooling
- Identified health or emotional problems
- Receipt of public assistance
- A failure-to-thrive infant
- Existence of special needs (parent and/or child)
- Receipt of previous report of abuse or neglect (parent or child)

The APP has proven effective at helping young parents. Over 90% of the teen parents who have participated in the program have not experienced a second pregnancy during the time they were involved in APP. The incidence of child abuse and neglect is much lower for APP participants than for teen parents outside of the program.

The APP is administered through the Department of Health and Human Services, Division of Public Health. Sites are selected through a competitive grant process and

grants are available for four year increments. The first eight programs were piloted in July of 1985. The programs are funded through a combination of Federal (Medicaid, TANF), State and local dollars.

**Hours of operation are as follows:**

**Monday: 8:00 am – 6:00 pm**

**Tuesday – Friday: 8:00 am – 5:00 pm**

***Bilingual services are available for all programs at Social Services***

**Agency: Johnston County Department of Social Services**

**Program: CRISIS PROGRAMS**

**Address: 714 North Street Smithfield, NC 27577**

**Phone: 919-989-5300**

**Fax: 919-989-5324**

**Web Address: [www.johnstonnc.com](http://www.johnstonnc.com)**

**Contact Person: Allison W. Smith**

**Title: Income Maintenance Supervisor II**

**Email: [allison.smith@johnstonnc.com](mailto:allison.smith@johnstonnc.com)**

**Services Provided:**

**Crisis Intervention Program (CIP)**

CIP is a program that provides emergency assistance to households that apply and are in heating or cooling related crisis. The following applies:

1. The household must have at least one U.S. Citizen or eligible alien and have a monthly income at or below 115% of the current poverty level.
2. CIP provides for a maximum benefit of \$300.00 per household during the state fiscal year (July-June). (exception: If the federal government appropriates funds for the summer based on excess heat, the client can get an additional \$300.00).
3. Funds can pay for fuel as well as electricity.



## **General Assistance (GA)**

General Assistance (GA) is a program that provides funds to individuals for prescription medicines. The following conditions apply:

1. Individuals must be evaluated for Medicaid and found not to be eligible prior to authorization of GA funds.
2. The reason for the medication must be life threatening in order to be eligible under this program.
3. There is a six (6) prescription limit per family per year.

## **Energy Neighbor**

Progress Energy – Energy Neighbor is a program that provides emergency assistance to a household for heating or cooling related crisis. The funds come from Progress Energy customers, employees, and corporate donations. The following applies:

1. Only persons who get their power bill from Progress Energy can receive these funds and the funds cannot be used for deposit.
  2. Recipients must have income at or below 150% of the current poverty level.
  3. The maximum amount per year is \$600.00; however, a recipient can only receive up to \$300.00 for each crisis.
- The heating season is November through May.
  - The cooling season is June through October. (A household can only receive a fan/air conditioner if they have any funds left in the total \$600 per year during this time period.)

## **Low Income Energy Assistance (LIHEAP)**

The Low Income Energy Assistance program gives families one time assistance on their heating bills which is paid directly to their heating source. Families must meet all of the following:

- Household must meet an income test.
- Household must be responsible for its heating bills.
- Household cannot have assets over \$2,200.
- The household must include an U.S. citizen or and eligible alien.

Where to Apply: Contact your local county department of social services where you live to find out where to apply. An elderly or disabled person who wishes to apply may call the county department of social services for assistance or send a representative to the county department of social services to apply for him. Please take the following information to apply:

- Information about your household's income.

- Information about your household's savings account or checking accounts.
- Information about your household's property, stocks, bonds, and other assets.
- Name, date of birth, and social security numbers of each household member.

When to Apply:

Application will be taken from December 1 through March 31. The Low Income Energy Assistance Program a first-come, first-served program which means once the funding is exhausted, applications will no longer be taken. Applications for priority groups which will be specified by the State will be taken beginning December 1 and all other groups will begin January 1.

**Hours of operation are as follows:**

**Monday: 8:00 am – 6:00 pm**

**Tuesday – Friday: 8:00 am – 5:00 pm**

***Bilingual services are available for all programs at Social Services***

**Agency: Johnston County Department of Social Services**

**Program: Day Care**

**Address: 714 North Street Smithfield, NC 27577**

**Phone: 919-989-5300**

**Fax: 919-989-5324**

**Web Address: [www.johnstonnc.com](http://www.johnstonnc.com)**

**Contact Person: Allison Smith / Lola Strickland**

**Title: Income Maintenance Supervisor II / Income Maintenance Lead Worker**

**Email: [allison.smith@johnstonnc.com](mailto:allison.smith@johnstonnc.com) / [lola.strickland@johnstonnc.com](mailto:lola.strickland@johnstonnc.com)**

**Services Provided:**

## **Overview**

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### **How Does Child Care Financial Assistance in North Carolina Work?**

**North Carolina's Division of Child Development uses a combination of state and federal funds to provide subsidized child care services to eligible families through a locally administered state-supervised voucher system. Annually each**

county receives a combination of state and federal funding from the Division of Child Development for subsidized child care services. The amount of funding allocated to each county is determined by legislation.

If the county [department of social services](#) or other local purchasing agency does not have enough funding to serve all families who apply for subsidized child care, the agency may establish priorities for services. For example, an agency may choose to give priority to working parent(s) or families who need child care to support child protective services.

If a family meets the eligibility criteria, the state of North Carolina pays a portion of the cost of child care. Parents are free to choose a child care arrangement that best fits their needs as long as the provider chosen participates in the Subsidized Child Care Program.

The amount the state pays for child care depends on:

- ☐ [The family's situational criteria](#)
- ☐ The family's income
- ☐ The cost of the child care provided

## Do I Qualify?

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### Is Child Care Subsidy an Option for My Family?

To qualify for the child care subsidy program, a family needs to meet both the situational and financial criteria.

#### Situational Criteria

You may be eligible to receive child care assistance if one or more of the following situations apply to your family:

- You are working or are attempting to find work
- You are in school or in a job training program
- Your child is receiving [child protective services](#)
- Your child needs care to support [child welfare services](#) or if your family is experiencing a crisis
- Your child has developmental needs

## Financial Criteria

Most families, including those receiving [Work First Family Assistance](#), are required to pay a percentage of their child care costs based upon their gross monthly income. The parent fee percentages are 10%, 9%, and 8% and are based on family size.

Using the table below, you can determine whether you may meet the financial criteria to receive child care subsidy. If you meet the financial criteria, you can estimate your child care subsidy costs.

## For Example

Using the table below, a family of 3 earning \$3,057 per month would be expected to pay 10% of their monthly income for child care. The family's total fee would be \$306 for full-time care regardless of the number of children in care. The family would pay the \$306 to the child care provider and the local purchasing agency would pay the remaining cost of the care to the child care provider.

**Maximum Income Eligibility Limits have increased as of August 1, 2007**

<b>Family Size</b>	<b>Maximum Gross Monthly Income</b>	<b>Parental Fee Percentage</b>
<b>1</b>	<b>\$1,892</b>	<b>10%</b>
<b>2</b>	<b>\$2,475</b>	
<b>3</b>	<b>\$3,057</b>	
<b>4</b>	<b>\$3,639</b>	<b>9%</b>
<b>5</b>	<b>\$4,221</b>	
<b>6</b>	<b>\$4,804</b>	<b>8%</b>
<b>7</b>	<b>\$4,913</b>	
<b>8</b>	<b>\$5,022</b>	
<b>9</b>	<b>\$5,131</b>	
<b>10</b>	<b>\$5,240</b>	
<b>11</b>	<b>\$5,350</b>	

12	\$5,459	
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## Application Process

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### Applying for the First Time

If this is your first time applying for child care subsidy, please be advised that you must be the parent or legal guardian of the child receiving subsidy benefits. The information provided below will help you with the application process.

If you meet the eligibility criteria provided in the "Do I Qualify" section of the website, you are ready to begin the process of applying for child care subsidy.

1. Contact your [County Child Care Contact](#) who will either assist you with the process or provide you with the name and location of the responsible agency in your county
2. The agency will inform you whether you need to schedule an appointment or simply stop by to apply for services. The agency can also inform you of the documentation that you need to bring to determine eligibility
3. During your visit, the agency will assess your family size and financial situation to determine eligibility
4. The agency has thirty (30) calendar days from the date the application is signed to determine eligibility. Typically, the eligibility assessment results will be provided to you during your visit, assuming that all needed documentation is provided. If additional documentation is needed, a timeframe for returning the information will be established. Once the documentation is returned, the eligibility assessment can be completed
5. If you are eligible for subsidized child care services, the agency issues a Child Care [Voucher](#) to you for each eligible child. The voucher indicates that the child is eligible for a subsidized child care payment and notifies the provider of the hours care is needed and the portion of the fee that you are responsible to pay

### How Do I Continue to Receive Subsidy Benefits?

Eligibility determination is valid for twelve (12) months for child care services, provided the family remains eligible.

**1. Throughout the year, the parent must report to a child care social worker in the agency any change in their circumstances that may affect eligibility within five (5) working days of the change.**

**2. Examples of changes in family situation or employment that must be reported include:**

- **Marriage, separation, or divorce**
- **Change in family size**
- **Change of job or work shift or in the number of hours or days employed**
- **Increase or decrease in income from employment, child support, or any other source**
- **Loss of employment, including leave of absence or temporary layoff**
- **Change in school enrollment or attendance**
- **Child receiving services moves out of the home or**
- **Change of address**

**If you are not sure about whether to report a particular change, then you should contact your child care social worker for clarification.**

**3. In order for an individual to continue to receive subsidized child care services, eligibility must be re-determined at least every twelve (12) months.**

**Hours of operation are as follows: Monday: 8:00 am – 6:00 pm**

**Tuesday – Friday: 8:00 am – 5:00 pm**

**Bilingual Services are available for all programs at Social Services**

**Agency: Johnston County Department of Social Services**

**Program: Food and Nutrition Services**

**Address: 714 North Street Smithfield, NC 27577**

**Phone: 919-989-5300**

**Fax: 919-989-5324**



**Web Address:** [www.johnstonnc.com](http://www.johnstonnc.com)

**Contact Person:** Debbie Barbour and Sandra Williams

**Title:** Income Maintenance Supervisor II

**Email:** [debbie.barbour@johnstonnc.com](mailto:debbie.barbour@johnstonnc.com) / [sandra.williams@johnstonnc.com](mailto:sandra.williams@johnstonnc.com)

**Services Provided:**

**Food and Nutrition Services**

Food and Nutrition Services (FNS) is a federal food assistance program that helps low-income families. In North Carolina monthly allotments of FNS benefits are issued via [Electronic Benefit Transfer cards \(EBT cards\)](#). The purpose of Food and Nutrition Services is to end hunger and improve nutrition and health. It helps eligible low-income households buy the food they need for a nutritionally adequate diet.

Food and Nutrition Services is an entitlement program, so all eligible individuals and households can receive assistance. Benefits may be used to purchase most foods at participating stores. They may not be used to purchase tobacco, pet food, paper products, soap products, or alcoholic beverages.

Eligible households must have the opportunity to access benefits no later than thirty days from the date of application. Individuals with special circumstances must have an opportunity to use their benefits within seven days from the date of application.

**Applicants must meet the following criteria:**

[Income](#)

[Household Composition](#)

[Citizenship/Immigration Status](#)

[Work Requirements](#)

[Resources](#)

## Income

All households must meet an income test to receive benefits. Income limits vary by household size.  
Income Reference Chart

<b>FNSU SIZE</b>	<b>GROSS INCOME</b>	<b>MAXIMUM BENEFIT ALLOTMENT</b>
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<b>1</b>	<b>\$1180</b>	<b>\$200</b>
<b>2</b>	<b>\$1594</b>	<b>\$367</b>
<b>3</b>	<b>\$2008</b>	<b>\$526</b>
<b>4</b>	<b>\$2422</b>	<b>\$668</b>
<b>5</b>	<b>\$2836</b>	<b>\$793</b>
<b>6</b>	<b>\$3249</b>	<b>\$952</b>
<b>7</b>	<b>\$3663</b>	<b>\$1052</b>
<b>8</b>	<b>\$4077</b>	<b>\$1202</b>

**Each Additional  
Member**

**(+414)**

**(+150)**

You *\*may\** be eligible for Food and Nutrition Services if your total income falls below the gross income limits for your household size. Please be aware that the eligibility workers at your [local county Department of Social Services](#) have many other factors to consider in determining if you are eligible.

"Household" size refers to the number in the household who may be eligible for FNS. Individuals who receive SSI may have different eligibility requirements.

### **Household Composition**

Individuals residing together, but purchasing and preparing their meals separately, may participate in FNS as a separate household. Some individuals must participate in FNS as one household even though they purchase and prepare their meals separately.

Individuals who must participate in FNS as one household are:

- Individuals living together who purchase/prepare their food together or will do so upon receipt of food assistance

- Spouses living together or individuals representing themselves as husband and wife to the community
- Individuals under 22 living with a parent
- Individuals under 18 under the parental control of an adult living in the home; or
- Two unmarried adults living in the same home who are parents of a mutual child

## **Citizenship/Immigration Status**

Each member of the FNS household must be a U. S. Citizen or an immigrant admitted to the United States under a specific immigration status. Citizens and eligible immigrants must also meet all other FNS eligibility requirements to receive assistance.

## **Work Requirements**

Some individuals are required to participate in Food and Nutrition Services work programs, such as Employment and Training and Workfare. These individuals must meet special work requirements. Able-bodied adults between 18 and 49 who do not have any dependent children can get benefits only for 3 months in a 36-month period if they do not work or participate in a Workfare or Employment and Training program other than job search. Other members of the household may continue to get benefits even if this person is not eligible. In some locations, this requirement does not apply.

This limited eligibility requirement does not apply if the adult:

- Works 20 hours a week (or 80 hours a month), or is engaging in a variety of allowable work-related activities for the same amount of time (such as Employment and Training, WIA, etc.), or
- Is pregnant or disabled, or
- Lives in a home where a child under the age of 18 resides.

In addition, adults in certain economically distressed counties are exempt from this requirement.

## **Resources**

Households may have \$2,000 in countable resources, such as bank accounts, money in certain retirement accounts, and vehicles. Households may have \$3,000 if at least one person is age 60 or older or disabled. Certain resources are not counted, such as homes, buildings, and land. The resources of people who receive Supplemental Security Income (SSI) or Work First payments or services are not countable.

The following licensed or unlicensed vehicles are totally excluded:

- One motor vehicle per adult (age 18 or older;

- Vehicles with equity value of less than or equal to \$1500;
- Vehicles used for long distance travel essential to the employment of a FNS Unit member;
- Vehicles used to transport a physically disabled FNS Unit member;
- Vehicles used to carry the FNS Unit's main source of water or heating fuel for home use;
- Income producing vehicles;
- Vehicles used as a home; and
- Leased vehicles.

Many women and children in Food and Nutrition Services households are also eligible for food assistance through the [Women, Infant and Children \(WIC\) program](#), administered by the [NC Division of Public Health](#).

To learn more about Food and Nutrition Services please visit the [United States Department of Agriculture](#)'s web site.

If you have questions or comments please feel free to contact us via [email](#)

## **Your Rights**

You have the right to:

- Receive an application when you ask for it.
- Turn in your application the same day you receive it.
- Receive your Food and Nutrition Services (or be notified that you are not eligible for the program) within 30 days after you turn in your application.
- Receive Food and Nutrition Services within 7 days if you are eligible for emergency benefits.
- Have a fair hearing if you disagree with any action taken on your case.

In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, religion, political beliefs, or disability. To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TTY). USDA is an equal opportunity provider and employer.

### **Hours of operation are as follows:**

**Monday: 8:00 am – 6:00 pm**

**Tuesday – Friday: 8:00 am – 5:00 pm**

***Bilingual services are available for all programs at Social Services***

**Agency: Johnston County Department of Social Services**

**Program: Program Integrity (Fraud)**

**Address: 714 North Street Smithfield, NC 27577**

**Phone: 919-989-5300**

**Fax: 919-989-5324**

**Web Address: [www.johnstonnc.com](http://www.johnstonnc.com)**

**Contact Person: Allison W. Smith**

**Title: Income Maintenance Supervisor II**

**Email: [allison.smith@johnstonnc.com](mailto:allison.smith@johnstonnc.com)**

**Services Provided:**

**Public Assistance Fraud**

Some people do not give important information or do not tell the truth when applying for help through their county Department of Social Services.

Under North Carolina law, persons must give caseworkers all information needed to decide if they can receive benefits such as Work First Family Assistance, Food and Nutrition Services, Medicaid, Energy Assistance, Special and Emergency Assistance, and surplus commodities. Those who do not report correctly commit a crime.

The crime--public assistance fraud--is committed when people (1) get or try to get help by giving caseworkers false and incorrect information, or (2) do not give information.

### **WHAT HAPPENS IF A PERSON IS FOUND GUILTY OF PUBLIC ASSISTANCE FRAUD?**

A person found guilty of public assistance fraud can be 1) fined, 2) placed in jail, or 3) fined and placed in jail.

People guilty of Food and Nutrition Services fraud may get an even stiffer penalty. That penalty could include all of the above, and you may not be allowed to get Food and Nutrition Services for:

- 1st offense - 1 year.
- 2nd offense - 2 years.
- 3rd offense - permanently.
- 1st time court finding of purchasing illegal drugs with Food and Nutrition Services - 2 years.
- Misrepresenting identity or residence to get Food and Nutrition Services in more than one place - 10 years.

### **WHAT CAN I DO?**

If you think someone is not being truthful with your county Department of Social Services, contact the [local office](#). You may also call the North Carolina Department of Health and Human Services through its [CARE-LINE](#) at 1-800-662-7030, Monday through Friday from 8 a.m. to 5 p.m. The call is toll-free. Or you may send an email to [dssweb@ncmail.net](mailto:dssweb@ncmail.net).

**Hours of operation are as follows:**

**Monday: 8:00 am – 6:00 pm**

**Tuesday – Friday: 8:00 am – 5:00 pm**

***Bilingual services are available for all programs at Social Services***



**Agency: Johnston County Department of Social Services**

**Program: Medicaid for Families and Children**

**Address: 714 North Street Smithfield, NC 27577**

**Phone: 919-989-5300**

**Fax: 919-989-5324**

**Web Address: [www.johnstonnc.com](http://www.johnstonnc.com)**

**Contact Person: Barbara Lee and Pam Braswell**

**Title: Income Maintenance Supervisor II / Income Maintenance Supervisor II**

**Email: [barbara.lee@johnstonnc.com](mailto:barbara.lee@johnstonnc.com) / [pam.braswell@johnstonnc.com](mailto:pam.braswell@johnstonnc.com)**

**Services Provided:**

**Medicaid for Families & Children**

The Family Medicaid program provides medical assistance to those individuals who meet the income and reserve test for the particular type Medicaid for which they are applying. When one applies for Medicaid, the worker must evaluate them from all Medicaid programs and enter them into the greater benefit for that particular client.

**Listed below are several different components of the Medicaid program:**

**MAF - Medicaid Assistance for Families** which means that a mother and/or father could be included in this Medicaid with their children if one of the parents is disabled, or unemployed and income and reserve is within allowable limits set by Federal policy.

MAF is a medically needy and a categorical needy income scale. The categorical needy income scale does not allow for a deductible. You are either eligible or ineligible.

The medically needy income scale allows a person to have a deductible which works just like car insurance. You pay whatever your deductible is and Medicaid will pay the balance of medical bills for a period not to exceed 6 months.

**MPW - Medicaid for Pregnant Woman** is component which pays for only pregnancy related medical expenses. There is no reserve test for this program and parents income is not considered.

**MIC - Medicaid for Infant/Children** is designed for infants and children through age of through 18. This component has three income scales. 185% of poverty for birth to age 1; 133% of poverty for age 1 through 5; and 100% of poverty for age 6 through 18. There is no reserve for this program.

The MPW and MIC programs were implemented in 1987 with the idea that if mothers received proper care while pregnant, they would birth healthier babies and if children received the medical care needed they would become healthy productive citizens.

**North Carolina Health Choice** - An insurance program implemented October 1, 1998. The program covers children birth through 18.

This program is based on 200% of the poverty level income. There is a \$50.00 fee for one child and \$100.00 for 2 or more children. If the family has 150% of the poverty level income or less, they do not have to pay a fee. Even though this program is through the Department of Social Services, Blue Cross/Blue Shield provides the care to the recipients and an information booklet which contains information on available services. It covers the same things that State Employees Health Insurance does and more. Medical providers who are signed up to take Blue Cross Insurance accept this card just like any other Blue Cross card and receive reimbursement the same way. The estimate of children needing this coverage in Johnston County is 1,007 with an additional 951 children who are in the county who are eligible for Medicaid and do not receive it. Our Department, along with the Health Department has the responsibility for outreach to get these children enrolled as quickly as possible.

There is one requirement that the children not be covered under any other health insurance for at least 6 months from October through March 1999. Starting with April, 1999, the children need only to have been without insurance for two months. These requirements were written into the law to get the neediest children on the program first.

**Medicaid "Be Smart" Family Planning Program.** Be Smart is a Medicaid "waiver" program that is available to North Carolina residents who do not qualify for other Medicaid benefits. The Medicaid "Be Smart" Family Planning Program is limited to services related to family planning.

***Be Smart  
Medicaid Family Planning Waiver***

Are you ready to be a mom or dad? Are you ready for another child? Do you think you might want more children? If you answered no to any of these questions, you may qualify to receive birth control methods and health care services for **free**.

The Be Smart Family Planning Program is designed to reduce unintended pregnancies and improve the well-being of children and families in North Carolina.

The Be Smart Program:

- Provides family planning and birth control;
- Is **free** - there is no cost for the services;
- Is voluntary; and
- Is confidential.

**Who can apply for Be Smart?**

- Women ages 19 through 55
- Men ages 19 through 60
- U.S. citizens or documented immigrants
- North Carolina residents who:
  - Are not pregnant;
  - Are not sterilized;
  - Are not incarcerated; and
  - Have income at or below 185% of the federal poverty level.
- Not currently on Medicaid
- Other requirements may apply.

**What does Be Smart provide?**

- Family planning initial and yearly exams;
- Follow-up family planning visits;

- Birth control and family planning counseling;
- Pregnancy tests;
- Some types of birth control methods like the pill, the shot, and IUDs, as well as vasectomies and tubal ligations;
- Family Planning Lab tests;
- HIV testing
- Limited screening and treatment for some STDs (limited to the initial family planning visit)
- Pap smears;
- Help on when to have a baby; and
- Referrals

### **Where can I go for Family Planning services?**

Any participating family planning provider enrolled with Medicaid can provide Be Smart services.

- Private Medical Providers
- Local Health Departments
- Federally Qualified Health Centers
- Rural Health Clinics
- Planned Parenthoods

### **What is not covered?**

- Dental
- Fertility testing and treatment
- Hysterectomies
- Abortions
- Pregnancy health care
- Ambulance
- Condoms
- Contraceptive Foam, Jellies, or Suppositories
- Durable Medical Equipment
- Home Health
- Inpatient Hospital
- Mental Health
- Optical
- Treatment for AIDS
- Treatment for Cancer
- Sick Visits
- Any service not related to Family Planning

**Hours of operation are as follows:**

**Monday: 8:00 am – 6:00 pm**

**Tuesday – Friday: 8:00 am – 5:00 pm**

**Bilingual Services are available for all programs at Social Services**

**Agency: Johnston County Department of Social Services**

**Program: Services for the Blind**

**Address: 714 North Street Smithfield, NC 27577**

**Phone: 919-989-5300**

**Fax: 919-938-0192**

**Web Address: [www.johnstonnc.com](http://www.johnstonnc.com)**

**Contact Person: Frank Hinson**

**Title: Services for the Blind Social Worker**

**Email: [frank.hinson@johnstonnc.com](mailto:frank.hinson@johnstonnc.com)**

**Services Provided:**

Johnston County Social Services administers assistance intended to help empower individuals who are blind or visually impaired to achieve their maximum potential.

These services are provided through the North Carolina Department of Health and Human Services, Division of Services for the Blind. The programs available in this area coordinate services in the following areas:

1. Independent Living
2. Vocational Rehabilitation

### 3. Prevention of Blindness

To obtain additional information and/or apply for these services, please contact Johnston County Social Services at (919) 989-5300. Ask for the Services For the Blind Case Manager. More detail on these services may be obtained from the [North Carolina Division of Health and Human Services](#).

**Hours of operation are as follows:**

**Monday: 8:00 am – 6:00 pm**

**Tuesday – Friday: 8:00 am – 5:00 pm**

**Mr. Hinson is in Johnston County on Monday, Tuesday, and Wednesday 8:00 am until 5:00 pm**

***Bilingual services are available for all programs at Social Services***

**Agency: Johnston County Department of Social Services**

**Program: Transportation**

**Address: 714 North Street Smithfield, NC 27577**

**Phone: 919-989-5300**

**Fax: 919-989-5324**

**Web Address: [www.johnstonnc.com](http://www.johnstonnc.com)**

**Contact Persons: Allison Smith for Medical Transportation**

**Cathy Renfrow for Work First Transportation**

**Title: Allison Smith ~ Income Maintenance Supervisor II**

**Cathy Renfrow ~ Work First Employment Lead Worker**

**Email: [allison.smith@johnstonnc.com](mailto:allison.smith@johnstonnc.com) or [cathy.renfrow@johnstonnc.com](mailto:cathy.renfrow@johnstonnc.com)**

**Services Provided:**

Transportation can be arranged for or provided by Johnston County Social Services in the following categories:

**Child Services**



Transportation for children who are being seen as clients of the Child Services Group within Social Services. This transportation may be provided for the following:

1. To transport children to and from foster homes for supervised visitation with family members.
2. To provide transportation for medical visits when necessary.
3. To provide transportation for court ordered mental health sessions and evaluations.

### **Work First and Jobs**

Transportation may be arranged or provided to ensure that clients participating in the Work First and Jobs program can travel to and from their job locations.

To obtain further information or apply for transportation as noted above, please contact Johnston County Social Services at (919) 989-5300. Contact should be made as early as possible for all transportation services. For Adult Medicaid and Work First needs, the request should be made at least 3 days before the transportation need begins as these services are arranged through [JCATS](#) or other commercial services.

### **Accessing DSS Medical Transportation**

Medical transportation can only be provided to medical appointments for services that are covered by Medicaid and appointments may be made by calling 919-202-5873.

A three (3) work day notice is required when scheduling medical transportation unless there is an “emergency”. If you get voice mail when you call to schedule medical transportation leave the following information: rider’s name, phone number, date of appointment, location of appointment, appointment time, any special needs one may have, and if a volunteer is needed to ride to the appointment, their name and relationship to the rider is needed.

In the event of an emergency, the doctor’s office needs to call DSS and explain the circumstances that require the emergency and DSS will try to reach a vendor that can provide the transportation.

The Medicaid client must notify DSS immediately if there is a change of address or phone number. It is important that client’s record be current so the transportation vendor’s schedule remains updated. This will prevent vendors from going to the wrong address.

**Hours of operation are as follows:**

**Monday: 8:00 am – 6:00 pm**

**Tuesday – Friday: 8:00 am – 5:00 pm**

***Bilingual services are available for all programs at Social Services***

**Agency: Johnston County Department of Social Services**

**Program: Work First Family Assistance**

**Address: 714 North Street Smithfield, NC 27577**

**Phone: 919-989-5300**

**Fax: 919-934-5235**

**Web Address: [www.johnstonnc.com](http://www.johnstonnc.com)**

**Contact Person: Terry Keene**

**Title: Prevention/Family Support/Work First Supervisor**

**Email: [terry.keene@johnstonnc.com](mailto:terry.keene@johnstonnc.com)**

**Services Provided:**

Johnston County's Work First program is putting welfare recipients to work. The program is built upon the belief that "all people have a responsibility to their families and community to work and provide for their children."

The program provides assistance in the form of a monthly check to families. The amount of the check depends on the number of individuals in the family and the amount of family income. There must be a child under age 18 in the home. Work First also provides Medicaid, which pays for the medical expenses of each individual in the check.

In order to receive a check, Work First requires parents to:

- Sign personal responsibility contracts detailing their plans for getting off welfare.
- Look for and accept work.
- Ensure that their children are immunized and receive regular medical check-ups.
- Keep their children in school.
- Cooperate with child support enforcement efforts

Work First understands that families need help to find and keep a job. That's why we provide short-term training (when needed), transportation, child care and health care. Together, these services can provide a safety net for families to remain in the workforce and off the welfare rolls.

## **Key Components of Work First**

### **Work**

Welfare recipients are required to get a job--either paid or unpaid--or be in short-term job training within 12 weeks. For at least 35 hours per week.

### **Limited Benefits**

Recipients must leave welfare rolls in two years. After three years, they may reapply for benefits. For hardship cases where families, through no fault of their own, have been unable to find work, local review boards can grant month-to-month extensions of cash benefits while the parent continues to look for work.

### **Personal Responsibility**

Welfare recipients must sign a mutual responsibility contract detailing their plan for moving off welfare. They must assume responsibility for their families. If they don't sign, they won't get benefits. If they break the contract, their benefits will be cut. Work First also:

- Requires teen parents to stay in school and live at home or under approved adult supervision.

- Caps benefits--there are no additional cash payments for children born after a family has been in Work First for longer than 10 months.
- Imposes sanctions for families that don't meet their Work First obligations.

### **Self-Sufficiency**

Work First eases the transition into the work force by helping with transportation, the job search and providing short-term job training.

- Work First participants have found jobs through the First Stop Employment Assistance Program where they are required to look for a job at the Employment Security Commission before they can qualify for a welfare check. At First Stop they are screened for job readiness and referred for additional job training if needed.
- Participants can get Medicaid to cover medical expenses up to a year after they leave welfare for work or other supportive services such as child care and/or transportation.
- Families experiencing a crisis that puts them at risk for going on welfare can get an emergency grant.

### **Protection of Children**

- Work First makes child care more affordable for families leaving welfare and for low-income working families.
- Under North Carolina's new children's health insurance plan, children whose families have left welfare would still be able to get health coverage.
- Work First personal responsibility agreements require parents to make sure their children get needed health care and attend school.

### **Johnston County is making Work First a Success**

Johnston County's welfare rolls have declined 62 percent--down from 1,382 families in June 1995 to 526 families in July 1999. More than 1,398 families have gotten jobs and gotten off welfare. 93% of these families have stayed off welfare after going to work. Of the 526 families left on the rolls, 368 are child-only cases. These cases include families whose parents may be receiving disability or where DSS has placed children from neglectful or abusive families with relatives in order to give the child a safe and healthy environment in which to grow and learn. These families are not financially able to care for these children; therefore, a check goes into the home monthly to help meet their needs. Child support is being pursued from the parents in these cases.

**Hours of operation are as follows:**

**Monday: 8:00 am – 6:00 pm**

**Tuesday – Friday: 8:00 am – 5:00 pm**

***Bilingual services are available for all programs at Social Services***

**AGENCY NAME:** The Enhancement Center

**ADDRESS:** 437 Moore Street, Clayton, NC

**PHONE:** 919-212-8580

**FAX** 919-212-8581

**WEB ADDRESS:** [southeasternhealthcarenc.com](http://southeasternhealthcarenc.com)

**CONTACT PERSON:** Joyce Harper **TITLE:** Administrative Officer

**E-mail:** [jharper@southeasternhealthcarenc.com](mailto:jharper@southeasternhealthcarenc.com)

**SERVICES/PROGRAMS PROVIDED:** Mental Health Services: Psychosocial Rehabilitation (PSR)

**REFERRAL PROCESS:** Call 919-250-<sup>3628</sup>~~3928~~ ask for Sylvia or Johnny

**AGES SERVED:** Adults aged 18 and over

**HOURS:** Program hours are 9:00am – 2:00pm

**ADMISSIONS / ELIGIBILITY:** Mental health diagnosis

*Medicaid*

**BILLING ARRANGEMENTS:** ~~Medicare~~ billable

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

Bilingual staff

**AGENCY NAME:** Fuller Center for Housing of Johnston County, Inc.

**ADDRESS:**

**PHONE:** [919-669-8449](tel:919-669-8449)

**FAX**

**WEB ADDRESS:** [www. Fullercenterjcnc.org](http://www.Fullercenterjcnc.org)

**CONTACT PERSON:** Mike Steward

**TITLE:** Pres./Ex.

Dir

[E-mail:mike@fullercenterjcnc.org](mailto:mike@fullercenterjcnc.org)

**SERVICES/PROGRAMS PROVIDED:** Building / Repair homes for low or fixed income families.

**REFERRAL PROCESS:** Application



**AGES SERVED:** 18- Up

**HOURS:** No fixed hours yet

**ADMISSIONS / ELIGIBILITY:** Application, housing income at 50% or below median.

**BILLING ARRANGEMENTS:** What they can afford.

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

Not at this time, but working on it.

**AGENCY NAME:** Harbor, Inc.

**MAILING ADDRESS:** PO Box 1903 Smithfield, NC 27577

**OFFICE PHONE:** 919-938-3566 **24 HOUR CRISIS LINE:** 919-631-5478 **FAX:** 919-938-4515

**WEB ADDRESS:** [www.harborshelter.org](http://www.harborshelter.org)

**CONTACT PERSON:** Mary Hodge **TITLE:** New Choices Coordinator

**E-mail:** [marant@harborshelter.org](mailto:marant@harborshelter.org)

**SERVICES/PROGRAMS PROVIDED:**

Services Provided:

- 24 Hour Shelter for abused women and children.
- 24 Hour Crisis Line support.
- Domestic Violence, Sexual Assault, and Life Skills Support Groups.
- Advocacy and support to victims and displaced homemakers.
- Safety Planning for victims trying to leave an abuser or victims who have recently left.
- Provides support and guidance to family members of the victim.
- Provides presentations to local clubs, churches, employers, groups to spread awareness about DV and SA.

Programs Include:

- **Court Advocacy Program:** assists with Domestic Violence Protective Orders (restraining orders), criminal warrants, address confidentiality, and provides victim advocacy during all hearings after the initial court process begins.
- **Sexual Assault Program:** provides hospital companionship for victims of sexual assault, teen and adult support groups, advocates for victims, links victims with resources and referrals.
- **Children's Program:** mentors child victims, holds summer activities for children, provides school supplies and Christmas assistance, children's support groups, assists with school enrollment, provides resources and referrals.
- **New Choices Program:** assists displaced homemakers become self-sufficient and gain the skills needed to enter or re-enter the workforce. Provides career counseling, employment resources, educational services, housing/daycare resources, financial assistance, and Life Skills Support Group.

**REFERRAL PROCESS:** For shelter placement, call the Crisis Line. All other programs can be reached at the Harbor Office phone number.

**AGES SERVED:** All Ages.

**HOURS:** Office Hours are 9am to 5pm, Monday through Friday. Shelter and Crisis Line are 24 hours.

**ADMISSIONS / ELIGIBILITY:** Must be a victim of domestic violence, sexual assault, or a displaced homemaker or a family member of a victim.

**BILLING ARRANGEMENTS:** All services are free.

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**  
We have bilingual volunteers on call at all times. We do have educational/awareness materials in Spanish. One bilingual staff member is available on the weekends.

**Johnston County Workforce Development Center**  
**Career Development**  
**(Human Resource Development, HRD)**

**ADDRESS:** 135 Bestwood Drive, Clayton, NC 27520

**PHONE:** (919) 209-2042

**FAX:** (919) 359-1176

**WEB ADDRESS:** <http://www.johnstoncc.edu/careerandskilltraininghrd.aspx>

**CONTACT PERSON:** Danielle Hussey      **Title:** Director of Career Development

**EMAIL:** [dphussey@johnstoncc.edu](mailto:dphussey@johnstoncc.edu)

**SERVICES/PROGRAMS PROVIDED:** Employability classes designed to educate and train individuals for success in the workplace. HRD provides skill assessments services, employability skills training, and career development counseling to unemployed and underemployed adults.

**REFERRAL PROCESS:** May apply directly. No referral needed.

**AGES SERVED:** 18 and older

**HOURS:** Office hours are from 8:00 a.m. to 5:00 p.m. Monday through Friday.

**ADMISSION/ ELIGIBILITY:** Any individual seeking the skills required to be successful in the job search process and the workplace.

**BILLING ARRANGEMENTS:** All HRD employability courses are FREE for any individual who is unemployed, underemployed or has received notification of a pending layoff. Individuals not meeting one of the three requirements will be required to pay the full cost of the course.

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIAL, ETC.):**  
None

**AGENCY NAME:** Johnston County Industries, Inc.

**ADDRESS:** 1100 East Preston Street Selma, NC 27576

**PHONE:** (919) 743-8700

**FAX :** (919) 965-8023

**WEB ADDRESS:** [www.jcindustries.com](http://www.jcindustries.com)

**CONTACT PERSON:** Erin Driver  
Coordinator/Mental Health Coordinator

**TITLE:** Facility Based

**E-mail:** [erin.driver@jcindustries.com](mailto:erin.driver@jcindustries.com)

**SERVICES/PROGRAMS PROVIDED:** Vocational Evaluation Services, Community Based Assessments, Work First Employment Services, Employee Development Services, Community Employment Services-Job placement, training and support, Employment Network/Ticket to work, Supported Employment and Long Term Follow Up, Community Activity and Employment Transition Services, Personal Enrichment/Life Skills Training, CAP I/DD Services-Day Supports, Supported Employment and Long Term Support, Psychosocial Rehabilitation Services, Yes I Can- at risk youth and dislocated workers, Cyber Café- culinary training for dislocated workers

**REFERRAL PROCESS:** complete application, supply documentation of disability or low income, referred from VR or DSS, meet with coordinator to determine eligibility

**AGES SERVED:** 16 and up

**HOURS:** 8 am to 4pm and varies based on consumer need

**ADMISSIONS / ELIGIBILITY:** documentation of disability or low income

**BILLING ARRANGEMENTS:** Medicaid, partner with VR, State funds (IPRS)

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

Written information is available in Spanish

**AGENCY NAME:** Johnston-Lee-Harnett Community Action, Inc.

**ADDRESS:** PO Drawer 711, 1102 Massey Street, Smithfield, NC 27577

**PHONE:** (919) 934-2145

**FAX:** (919) 934-6231

**WEB ADDRESS:** [jlhcommunityaction.org](http://jlhcommunityaction.org)

**CONTACT PERSON:** E. Marie Watson

**TITLE:** Executive Director

**E-mail:** [jlhca@jlhcommunityaction.org](mailto:jlhca@jlhcommunityaction.org)

**SERVICES/PROGRAMS PROVIDED:** Community Action, through coordination of public and private service programs, promotes self-sufficiency for low-income individuals and encourages the use of private sector involvement in anti-poverty activities. Our primary goal is to obtain grant funds and local contributions to use for services and activities which have a major impact on the causes of poverty in the community.

**Head Start /Early Head Start: Shirley Whitley, Director**

Head Start provides comprehensive pre-school services to pregnant mothers and for children 6 weeks to 4 years old as well as services to the entire family.

**CSBG: Tina Ray, Director**

The CSBG (Community Services Block Grant) Program, Successfully Transitioning to Achieve Real Self-Sufficiency (STARS), is designed to help low-income individuals realize their goal of becoming self-sufficient. The primary components of this program are Educational Assistance, Employment Assistance, Housing Assistance, Financial Literacy and Emergency Assistance. Participants will be encouraged to foster skills specifically intended to promote economic self-development.



**Weatherization/ARRA Weatherization: Waymon Gainey, Energy Director**

The Weatherization Program provides services to make homes energy efficient and safe. The Heating Appliance Repair/Replacement Program (H.A.R.R.P) is designed to replace or repair heating/air systems as needed and offer educational workshops. In addition to regular weatherization, through funds received from the American Recovery and Reinvestment Act several eligible homes will be weatherized which will make their homes more energy efficient.

**HUD Housing Counselor: Della Gullatt**

A Certified Housing and Urban Development Housing Counselor provide default and delinquent counseling pre- and post- purchase homeownership counseling.

**Single Family Rehab/Economic Development: Glenn Avery, General Contractor:**

Participants must be 65 years of age or older and own their own homes. Repairs are made to the home that will make them safe and energy efficient.

**REFERRAL PROCESS:** When resources are not available, clients are referred to other agencies/organizations. Referrals from other agencies are accepted. Clients may call for an appointment with Head Start and Weatherization, but walk-ins are welcomed.

**AGES SERVED:** General Public is accepted for all programs except Head Start which serves pregnant mothers and children ages 6 weeks to 4 years of age.

**HOURS:** Head Start: M-F 7:00 AM – 5:00 PM: All other programs: M- F 8:00 AM – 5:00 PM

**ADMISSIONS / ELIGIBILITY:** Proof of income for all household members, Social Security Cards and a Picture ID.

**BILLING ARRANGEMENTS:** All services are free of charge to clients

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

English and Spanish speaking staff is available, and written materials are available in English and Spanish.

**AGENCY NAME:** Johnston Recovery Services

**ADDRESS:** 1699 Old US Hwy 70 West

**PHONE:** 919-359-1699

**FAX** 919-359-1697

**WEB ADDRESS:** [www.johnstonrecovery.com](http://www.johnstonrecovery.com)

**CONTACT PERSON:** Jennifer Davison **TITLE:** Program Director

**CONTACT PERSON:** Cherri Swails **TITLE:** Counselor, Housing/Resources  
Coordinator

**E-mail:** [johnstonrecovery@embarqmail.com](mailto:johnstonrecovery@embarqmail.com), [cswails04@gmail.com](mailto:cswails04@gmail.com)

**SERVICES/PROGRAMS PROVIDED:** Opioid Treatment Program

**REFERRAL PROCESS:** Self-referral, consumers can make appointments at JRS and can also go through their LME.

**AGES SERVED:** Adults 18+

**HOURS:** Dosing Hours M-F 6-11 am S 7-10, Office Hours M-F 5:30-1:30

**ADMISSIONS / ELIGIBILITY:** Must be 18 and addicted to opiates for over one year.

**BILLING ARRANGEMENTS:** Self-pay and accept Medicaid for consumers in Johnston County LME, Wake County LME, Eastpointe LME and The Beacon Center LME.

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

Staff can communicate in Spanish and materials can be translated to suit bilingual population.

**AGENCY NAME:** Lindley Habilitation Services

**ADDRESS:** 4904 Water's Edge Dr, Suite 284, Raleigh NC 27606

**PHONE:** 336-404-0168

**FAX:** 919-858-0686

**WEB ADDRESS:** [www.lindleyhabilitation.com](http://www.lindleyhabilitation.com)

**CONTACT PERSON:** Kathryn Thill

**TITLE:** Intake/Recruiting Specialist

**E-mail:** [kthill@lindleyhabilitation.com](mailto:kthill@lindleyhabilitation.com)

**SERVICES/PROGRAMS PROVIDED:**

**CAP I/DD:** Home & Community Services, Unlicensed AFL Homes, Supported Employment, Enhanced Services, Crisis Services, Personal Care, Respite, , Individual Caregiver Training Education, Day Supports (not currently available in Johnston Co)

**Agency Training:** NCI (all levels), Red Cross CPR & FA, OSHA

**Private Pay Services:** one-on-one or 2:1 ratio per family request

**REFERRAL PROCESS:** Contact Kathryn Thill or complete Admissions Assessment tool on our referral webpage. Initial intake assessment is completed to ensure that we are able to safely and adequately meet the needs of the consumer, inclusive of providing quality staff with proper training, as well as having back up options to provide additional support.

**AGES SERVED:** All

**HOURS:** as needed, based on consumer/family need/hours authorized

**ADMISSIONS / ELIGIBILITY:** CAP I/DD services, or ability to cover Private Pay costs

**BILLING ARRANGEMENTS:** CAP: directly through Medicaid

Private Pay: monthly invoice prior to scheduled services

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

Upon Request

**AGENCY NAME:** Pathways to Life, Inc.

**ADDRESS:** 1420-A South Pollock St., Selma, NC 27576

**PHONE:** 919-938-0442

**FAX :** 919-938-0448

**WEB ADDRESS:** [www.pathwaystolifessmithfield.com](http://www.pathwaystolifessmithfield.com)

**CONTACT PERSON:** Tara Woodard **TITLE:** Site Manager

**E-mail:** [twoodard@pwstolife.com](mailto:twoodard@pwstolife.com)

**SERVICES/PROGRAMS PROVIDED:** Mental Health Services

Basic Benefit Services: Outpatient therapy (office-based and in-home), Comprehensive Clinical Assessments, Psychiatric services

Enhanced Benefit Services: Targeted Case Management, Intensive In-Home

**REFERRAL PROCESS:** Call or Fax or submit via the website.

**AGES SERVED:** all ages

**HOURS:** Mon-Fri, 9am-5pm. Evening and weekend appointments available upon request.

**ADMISSIONS / ELIGIBILITY:** We accept self-pay, IPRS funds, Medicaid and NC Healthchoice. Anyone receiving services must have a mental health diagnosis which is determined upon the initial visit.

**BILLING ARRANGEMENTS:** We bill Medicaid/NC Healthchoice/Johnston Co. directly. If a person is self-pay, then payment is due upon date of service.

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**  
We have intake and program information in Spanish. We several staff persons who are bilingual.



AGENCY NAME: Partnership for Children of Johnston County – Family Support Services

ADDRESS: Services Office- 1406-A S. Pollock Street  
Selma, NC 27576

PHONE: 919-202-0002 FAX: 919-202-0902 WEB ADDRESS:  
[www.pfcjc.org](http://www.pfcjc.org)

CONTACT PERSON: Christina Peterson TITLE: Family & Community Outreach Coordinator

E-mail: [cpeterson@pfcjc.org](mailto:cpeterson@pfcjc.org)

**SERVICES/PROGRAMS PROVIDED:**

Family Support Services such as diapers, baby formula, emergency clothing, & emergency utility assistance. All services depend on availability.

REFERRAL PROCESS: Walk-ins are welcome.

AGES SERVED: Families with young children Birth to 5 years old (pre-Kindergarten).

HOURS: Monday through Friday 8am to 5pm

ADMISSIONS / ELIGIBILITY: Family Services: Any Family with young children Birth to 5 years old (pre-Kindergarten). Services are Free.

BILLING ARRANGEMENTS: None

SPECIAL HIGHLIGHTS / OTHER INFORMATION:

AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):

Bi-lingual staff is available also bi-lingual written materials.

AGENCY NAME: Partnership for Children of Johnston County - Inclusion Specialist

ADDRESS: Services Office- 1406-A S. Pollock Street  
Selma, NC 27576

PHONE: 919-202-0002 FAX: 919-202-0902 WEB ADDRESS:  
[www.pfcjc.org](http://www.pfcjc.org)

CONTACT PERSON: Charity Bouren TITLE: Inclusion Specialist E-mail:  
[cbouren@pfcjc.com](mailto:cbouren@pfcjc.com)

**SERVICES/PROGRAMS PROVIDED:**

The Johnston Inclusion Support Services Program will provide consultation, technical assistance and training to child care providers and families of children in care when there is a developmental, behavioral or social-emotional concern.

**REFERRAL PROCESS:** Child Care Providers, Parents or other Child Care Professionals working with-in the program can call in to request support and/or training. Referrals are processed and assigned in the order received and according to staff availability.

**AGES SERVED:** Children Birth to 5 years old.

**HOURS:** Monday through Friday 8am to 5pm

**ADMISSIONS / ELIGIBILITY:** Assistance is Free to families and licensed child care providers in Johnston County. Children being served must be attending licensed child care facilities in Johnston County.

**BILLING ARRANGEMENTS:** None

**SPECIAL HIGHLIGHTS / OTHER INFORMATION:**

AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):

AGENCY NAME: Partnership for Children of Johnston County – NC Pre-Kindergarten Program

ADDRESS: Services Office- 1406-A S. Pollock Street  
Selma, NC 27576

PHONE: 919-202-0002 FAX: 919-202-0902 WEB ADDRESS:  
[www.pfcjc.org](http://www.pfcjc.org)

CONTACT PERSON: Dwight Morris TITLE: Executive Director

E-mail: [info@pfcjc.org](mailto:info@pfcjc.org)

SERVICES/PROGRAMS PROVIDED:

NC Pre-K is the quality Pre-Kindergarten experience for at-risk four year old children, the year before they enter Kindergarten.

REFERRAL PROCESS: Parents make an appointment to apply and must meet eligibility requirements.

AGES SERVED: Children 4 years old by August 31 the year before they are supposed to start Kindergarten.

HOURS: Monday through Friday 8am to 5pm

ADMISSIONS / ELIGIBILITY: The program is Free but participants must meet eligibility requirements.

BILLING ARRANGEMENTS: None

SPECIAL HIGHLIGHTS / OTHER INFORMATION:

AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):

There is bilingual staff in this department and all materials are in English and Spanish.

AGENCY NAME: Partnership for Children of Johnston County – Resource Centers

ADDRESS: Services Office- Selma	Clayton Site	Benson Site
1406-A S. Pollock Street Street	918 Hwy 42 West	304 S. Lee
Selma, NC 27576 27542	Clayton, NC 27520	Benson, NC

Selma PHONE: 919-202-0002 FAX: 919-202-0902 WEB ADDRESS:  
[www.pfcjc.org](http://www.pfcjc.org)

CONTACT PERSON: see below	TITLE: Family Support Specialists	
Benson Site: Rosie Stumpf 919-207-2112	email: <a href="mailto:rstumpf@pfcjc.org">rstumpf@pfcjc.org</a>	PHONE:
Clayton Site: Darrella Cavenaugh 919-585-7023	email: <a href="mailto:dcavenaugh@pfcjc.org">dcavenaugh@pfcjc.org</a>	PHONE:
Selma Site: Erica Reid 919-202-0002	email: <a href="mailto:ereid@pfcjc.org">ereid@pfcjc.org</a>	PHONE :

#### SERVICES/PROGRAMS PROVIDED:

Educationally appropriate toys and resources including books, curriculum guides, die-cut machine plus copier and lamination services for the early care and education professionals and families of young children.

REFERRAL PROCESS: Just come in and join.

AGES SERVED: Education professionals and families of young children.

HOURS:

*Selma* - Monday through Friday 8am to 5pm

*Clayton* – Monday: 8:30am to 4:30pm

*Benson*- Tuesday: 10am to 7pm

Tuesday: 10am to 7pm  
4:30pm

Thursday: 8:30am to

Thursday: 8:30am to 4:30pm

- Clayton and Benson both Closed from 2pm to 3pm for lunch

ADMISSIONS / ELIGIBILITY: There is a minimal annual fee to be a member of the Resource Library.

BILLING ARRANGEMENTS: None

AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):

There is bilingual staff to help in this department and there are materials in English and Spanish.

AGENCY NAME: Partnership for Children of Johnston County – Safe Kids Johnston County

ADDRESS: Services Office- 1406-A S. Pollock Street  
Selma, NC 27576

PHONE: 919-202-0002 FAX: 919-202-0902 WEB ADDRESS:  
[www.pfcjc.org](http://www.pfcjc.org)

CONTACT PERSON: Christina Peterson TITLE: Safe Kids Johnston County  
Coordinator

E-mail: [cpeterson@pfcjc.org](mailto:cpeterson@pfcjc.org)

Jennifer Williams TITLE: Buckle Up Coordinator E-mail: [jwilliams@pfcjc.org](mailto:jwilliams@pfcjc.org)

#### SERVICES/PROGRAMS PROVIDED:

Safe Kids Johnston County Mission is to reduce death and injury to children ages 0 – 14 years in Johnston County through prevention, intervention, and education. Some Programs include:

Child Passenger Safety, Pedestrian Safety, Water Safety, Fire Prevention, Poison Prevention, &

Fire Arm Safety

Buckle Up Program: Child Passenger Safety Education is FREE to anyone.



Car Seats are available to families who need them. The cost is minimal.

REFERRAL PROCESS: By agency or walk-in basis

AGES SERVED: Children Birth to 12 years old.

HOURS: Monday through Friday 8am to 5pm. Car Seats are by appointment only.

ADMISSIONS / ELIGIBILITY: Assistance is available to families in Johnston County.

BILLING ARRANGEMENTS: Can be made for car seats.

SPECIAL HIGHLIGHTS / OTHER INFORMATION:

AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):

AGENCY NAME: Partnership for Children of Johnston County – Early Care & Education

ADDRESS: Services Office- 1406-A S. Pollock Street  
Selma, NC 27576

PHONE: 919-202-0002 FAX: 919-202-0902 WEB ADDRESS:  
[www.pfcjc.org](http://www.pfcjc.org)

CONTACT PERSON: Keri Davis E-mail: [kdavis@pfcjc.org](mailto:kdavis@pfcjc.org)

TITLE: Early Care and Education Coordinator/Curriculum Specialist

See Below TITLE: Early Childhood Specialists

Karen Wall E-mail: [kwall@pfcjc.org](mailto:kwall@pfcjc.org)

Dawn Winn-Burdo E-mail: [dwinn-burdo@pfcjc.org](mailto:dwinn-burdo@pfcjc.org)

Krista Hollyfield E-mail: [khollyfield@pfcjc.org](mailto:khollyfield@pfcjc.org)

#### SERVICES/PROGRAMS PROVIDED:

Technical assistance to all child care providers and start-up facilities and Homes in Johnston County.

REFERRAL PROCESS: Child Care Providers call in for help with certain areas or they are referred to our agency by other consultants.

AGES SERVED:

HOURS: Monday through Friday 8am to 5pm

ADMISSIONS / ELIGIBILITY: Technical Assistance is Free to licensed child care providers in Johnston County.

BILLING ARRANGEMENTS: None

SPECIAL HIGHLIGHTS / OTHER INFORMATION:

AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):

AGENCY NAME: Partnership for Children of Johnston County – Teacher Incentive Program (TIP)

ADDRESS: Services Office-

1406-A S. Pollock Street

Selma, NC 27576

Selma PHONE: 919-202-0002 FAX: 919-202-0902 WEB ADDRESS:

[www.pfcjc.org](http://www.pfcjc.org)

CONTACT PERSON: Melissa Price      TITLE: TIP/Training Coordinator   E-mail:  
[mprice@pfcjc.org](mailto:mprice@pfcjc.org)

**SERVICES/PROGRAMS PROVIDED:**

An incentive program for early care and education professionals that promotes a highly qualified child care workforce.

**REFERRAL PROCESS:** Child care owners or directors set up contract with Program Specialist.

**AGES SERVED:** Child Care Professionals who serve children ages birth to five years old..

**HOURS:** Selma Site - Monday through Friday 8am to 5pm

**ADMISSIONS / ELIGIBILITY:** There is a fee to the business.

**BILLING ARRANGEMENTS:** Made with the program specialist.

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

AGENCY NAME: Partnership for Children of Johnston County – ABCD Program  
Assuring Better Child Health & Development

ADDRESS: Services Office-

1406-A S. Pollock Street

Selma, NC 27576

Selma PHONE: 919-202-0002 FAX: 919-202-0902 WEB ADDRESS:  
[www.pfcjc.org](http://www.pfcjc.org)

CONTACT PERSON: Michele Guyader TITLE: ABCD Project Coordinator

E-mail: [mguyader@pfcjc.org](mailto:mguyader@pfcjc.org)

#### SERVICES/PROGRAMS PROVIDED:

The ABCD Project Coordinator is available to provide ongoing support to physicians and their staff as they evaluate their current screening and referral process and plan for improvement. Resources available to participating ABCD Project practices are: In-office training and technical assistance, Monthly office consultations, Low or no cost program materials, Referral Guide/Directory.

#### REFERRAL PROCESS:

AGES SERVED:

HOURS: Vary

ADMISSIONS / ELIGIBILITY:

BILLING ARRANGEMENTS: None

AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):

**AGENCY NAME:** Johnston County Public Health Department

**ADDRESS:** 517 North Bright Leaf Blvd. Smithfield, NC 27577

**PHONE:** (919) 989-5200

**FAX** (919) 989-5199

**WEB ADDRESS:** [http://www.johnstonnc.com/mainpage.cfm?category\\_level\\_id=450](http://www.johnstonnc.com/mainpage.cfm?category_level_id=450)

**CONTACT PERSON:** Tierra Taylor      **TITLE:** Public Health Education Specialist

**E-mail:** [tierra.taylor@johnstonnc.com](mailto:tierra.taylor@johnstonnc.com)

**SERVICES/PROGRAMS PROVIDED:**

Primary Care Clinic

Board Certified Physicians

Physician Extenders

Sick & Well Care for Adults

Medicaid & Medicare Accepted

Insurance Accepted via Approval

Specialty Programs: Breast

& Cervical Cancer and Wise Woman

Epidemiology Clinic

Communicable Disease

TB Treatment

Flu Vaccine

Adult Immunizations

Travel Vaccines

HIV/STI Testing

Child Health Clinic

Immunizations

Well & Sick Care for Children

Physicals

Specialty Programs:

-Care Coordination for Children  
(CC4C)

-Parents As Teachers (PAT)

-Sickle Cell Counseling

Maternal Health Clinic

Prenatal Care

OB Care Management

Maternity Hospital Follow-up

Family Planning Clinic

Contraception

Annual Exams

Pregnancy Testing

Vasectomy Program

Nutrition Program: WIC Women, Infants  
and Children

Health Education

Clinical Education including;

- Prenatal
- Contraception
- Communicable disease

Special Supplemental Nutritional  
Program

Breastfeeding Peer Counselor Program

Medical Nutrition Therapy (by referral)

Laboratory Services for Established  
Patients

Multiple Lab tests performed on site:

Hemoglobin

Glucose, HbA1c

Blood Lead

Urinalysis

Urine Pregnancy and Prenatal Panel

Extensive analysis for transmitted  
infections

Other tests as ordered by physicians



- Chronic disease

- Child health concerns

#### Community Programs

- Schools

- Worksites

- Faith communities

- Civic organizations

- Community agencies

- Others as requested

#### Specialty Education:

- Smoking Cessation

- Diabetes

- Lamaze

**REFERRAL PROCESS:** By Appointment

**AGES SERVED:** All ages

**HOURS:** Monday-Thursday 8:00am-6:00pm and Friday 8:00am-5:00pm

**ADMISSIONS / ELIGIBILITY:**

**BILLING ARRANGEMENTS:** Sliding fee scale for most services based upon qualifications. Medicaid and Medicare are accepted insurances. We also accept Health Choice and Medicare Advantage plans such as Humana, Wellcare and Advantra.

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**  
Bilingual services available (interpreters) and written materials

**AGENCY NAME:** Southeastern Healthcare of NC: formerly known as Stellar Peer Recovery

**ADDRESS:** 400 East Main Street, Clayton, NC 27520

**PHONE:** 919-553-2445

**FAX**

**WEB ADDRESS:**

**CONTACT PERSON:** Joyce Harper

**TITLE:** Administrative Officer

**E-mail:** jharper@southeasternhealthcarenc.com

**SERVICES/PROGRAMS PROVIDED:** Peer Recovery/Substance Abuse Recovery

**REFERRAL PROCESS:** Initial screening and referral by Johnston County MH or its contract agent

**AGES SERVED:** Adults aged 18 and older

**HOURS:**

**ADMISSIONS / ELIGIBILITY:** MH/DD/SA

**BILLING ARRANGEMENTS:** Billed to the Area Authority

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

**AGENCY NAME:** Social Security Administration

**ADDRESS:** 633 Venture Drive Smithfield, NC 27577

**PHONE** 888-527-9331 or 800-772-1213

**FAX:** 919-934-5356

**WEB ADDRESS:** [www.socialsecurity.gov](http://www.socialsecurity.gov)

**CONTACT PERSON:** Billy Vincent **TITLE:** District Manager

**E-mail:** [billy.vincent@ssa.gov](mailto:billy.vincent@ssa.gov)

**SERVICES/PROGRAMS PROVIDED:**

Retirement, Disability, Survivors, Medicare, Supplemental Security Income (SSI), and SSN cards.

**REFERRAL PROCESS:** Internet, Appointment, Telephone, or Walk In

**AGES SERVED:** All

**HOURS:** Monday-Friday 9:00am – 3:30pm

**ADMISSIONS / ELIGIBILITY:** Entitlement factors vary for different programs.

**BILLING ARRANGEMENTS:** Public Service / No charge

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.):**

Bilingual Services available for various languages.

**Name of Agency:** NC DIVISION OF VOCATIONAL REHABILITATION

**Address:** 18 NOBLE STREET  
SMITHFIELD, NC 27577

**Telephone:** 919-934-0525

**FAX:** 919-934-1781

**Contact Person:** Janet J. Davis **Email:** [janet.j.davis@dhhs.nc.gov](mailto:janet.j.davis@dhhs.nc.gov)

**Web Address:** [www.dhhs.state.nc.us](http://www.dhhs.state.nc.us)

**SERVICES PROVIDED:** Vocational Rehabilitation serves individuals who have a chronic disability that has kept an individual from getting or keeping a job. The primary goal is to assist that person to become employed and retain their employment for a minimum of 90 days. Services are varied and numerous, but all services are oriented towards employment.

**HOURS:** 8:00 AM to 5:00 PM, Monday – Friday, excluding holidays.

**ELIGIBILITY CRITERIA & RESTRICTIONS:** Individuals must have a physical or mental impairment which, for them, constitutes or results in a substantial impediment to employment. They must be able to benefit from vocational rehabilitation services in terms of an employment outcome; they must require vocational rehabilitation services to prepare for, and engage in or retain gainful employment.

**BILLING ARRANGEMENTS:** There are no fees to apply for vocational rehabilitation services, but individuals must meet financial criteria to receive cost services, once eligible. Services provided that are not based on income include counseling & guidance, vocational evaluation, employment-marketing skills, job placement, and follow-up services.

**REFERRAL PROCESS:** Call the VR office @ 934-0525 to be scheduled for the next orientation class. If a minor under the age of 18 or if declared incompetent, a parent/guardian must be present to sign all applications forms and releases. Please bring social security number, or a form of identification, income of the family (if cost services are being requested), previous employers and dates of employment, and any medical information that will support disabilities to the orientation class or intake appointment.

**Hours:** 8:00 To 5:00, Monday - Friday

**AVAILABILITY OF BILINGUAL SERVICES (STAFF, WRITTEN MATERIALS, ETC.)** Written materials available in Spanish, Interpreter provided when necessary.

## Appendix PPP-The Sixty Eighth Appendix: 2014 Community Health Assessment Survey

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### Instructions to Survey interviewers/ CHA Team:

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- You may change this survey in any way. You may add or remove questions. It is just a guide for you. All questions have been pretested and reviewed for accuracy. So, before changing the wording of the questions, we encourage you to seek professional advice on questionnaire design.
- You must have demographic questions in your survey to be able to tell how representative your survey sample is. Use these questions to compare your sample population to your county's population (from the US Census estimates for that year). The demographic categories in this survey match the categories from the 2010 Census questions to make your comparisons easier.
- Instructions for the interviewers are in **red** type. **Do not read these instructions out loud** when administering the surveys. If these surveys will be self-administered, you may want to simplify the directions.
- Questions similar to or exactly like those from the 2011 Behavioral Risk Factor Surveillance System (BRFSS) are in **blue** type. You may take these questions out of your CHA survey if you have recent county-level BRFSS data for these questions. Recent data includes data from the year before your Community Health Assessment is due. Ex: If your CHA is due in December 2012 and you have BRFSS 2011 data for your county, do not include these questions in your community survey.

## JOHNSTON COUNTY COMMUNITY HEALTH SURVEY



### Community Health Survey

***Read the following section after personalizing to each potential participant:***

***We are conducting a survey of our county to learn more about the health and quality of life in Johnston County. The Johnston County Health Department, Healthy Carolinians of Johnston County and Johnston County United Way will use the results of this survey to help address the major health and community issues in our county.***

***Your address was one of many randomly selected from our county. The survey is completely voluntary, and it should take no longer than 20 minutes to complete. Your answers will be completely confidential. The information you give us will not be linked to you in any way.***

**Would you like to participate?** \_\_\_\_\_Yes \_\_\_\_\_ No

***(If no, stop the survey here.)***

#### **Eligibility**

**Do you live in Johnston County?** \_\_\_\_\_Yes \_\_\_\_\_ No

***(If no, stop the survey here.)***

**Have you participated in this year's survey already?**



Survey number \_\_\_\_\_

\_\_\_\_ Yes      \_\_\_\_\_ No      \_\_\_\_\_ Not sure

*(If yes or not sure, stop the survey here.)*

## Johnston County Community Health Survey

### PART 1: Quality of Life Statements

Please tell us whether you “strongly disagree”, “disagree”, “neutral”, “agree” or “strongly agree” with each of the next 6 statements.

Statements	<i>Circle the number that best represents the person's opinion of each statement below.</i>				
	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
<b>1. How do you feel about this statement, “There is good healthcare in Johnston County”?</b>  Consider the cost and quality, number of options, and availability of healthcare in the county.	1	2	3	4	5
<b>2. How do you feel about this statement, “Johnston County is a good place to raise children”?</b>  Consider the quality and safety of schools and child care programs, after school programs, and places to play in this county.	1	2	3	4	5
<b>3. How do you feel about this statement, “Johnston County is a good place to grow old”?</b>  Consider the county's elder-friendly housing, transportation to medical services, recreation, and services for the elderly.	1	2	3	4	5
<b>4. How do you feel about this statement, “There is plenty of economic opportunity in Johnston County”?</b> Consider the number and quality of jobs, job training/higher education opportunities, and availability of affordable housing in the county.	1	2	3	4	5
<b>5. How do you feel about this statement, “Johnston County is a safe place to live”?</b>					

Consider how safe you feel at home, in the workplace, in schools, at playgrounds, parks, and shopping centers in the county.	1	2	3	4	5
<b>6. How do you feel about this statement, “There is plenty of help for people during times of need in Johnston County”?</b>  Consider social support in this county: neighbors, support groups, faith community outreach, community organizations, and emergency monetary assistance.	1	2	3	4	5

## PART 2: Community Improvement

**Read:** The next set of questions will ask about community problems, issues, and services that are important to you. Remember your choices will not be linked to you in any way.

7. Please look at this list of community issues. In your opinion, which one issue most affects the quality of life in Johnston County? (Please choose only one.) If there is a community problem that you consider the most important and it is not on this list, please write it in.

- |   |  |
|---|--|
| a. <input type="checkbox"/> Pollution (air, water, land)              | j. <input type="checkbox"/> Domestic Violence                              |
| b. <input type="checkbox"/> Dropping out of school                    | k. <input type="checkbox"/> Violent crime (murder, assault)                |
| c. <input type="checkbox"/> Low income/poverty                        | l. <input type="checkbox"/> Theft  |
| d. <input type="checkbox"/> Homelessness                              | m. <input type="checkbox"/> Rape/sexual assault                            |
| e. <input type="checkbox"/> Lack of/inadequate health insurance       | n. <input type="checkbox"/> Unemployment                                   |
| f. <input type="checkbox"/> Hopelessness                              | o. <input type="checkbox"/> Affordability of health services               |
| g. <input type="checkbox"/> Discrimination/racism                     | p. <input type="checkbox"/> Inadequate/unaffordable housing                |
| h. <input type="checkbox"/> Lack of community support                 | q. <input type="checkbox"/> Animal control issues                          |
| i. <input type="checkbox"/> Neglect and abuse ( <i>Specify type</i> ) | r. <input type="checkbox"/> Lack of culturally appropriate health services |
| a) <input type="checkbox"/> Elder abuse                               | s. <input type="checkbox"/> Unsafe or unmaintained roads                   |
| b) <input type="checkbox"/> Child abuse                               | t. <input type="checkbox"/> None   |
| c) <input type="checkbox"/> Other abuse: _____                        |  |

8. **In your opinion, which one of the following services needs the most improvement in your neighborhood or community? (Please choose only one.)** If there is a service that you think needs improvement that is not on this list, please let me know write it in.

- |  |   |
|--|---|
| a. <input type="checkbox"/> Animal control   | m. <input type="checkbox"/> Healthy family activities                                     |
| b. <input type="checkbox"/> Child care options   | n. <input type="checkbox"/> Positive teen activities                                      |
| c. <input type="checkbox"/> Elder care options   | o. <input type="checkbox"/> Transportation options  |
| d. <input type="checkbox"/> Services for disabled people   | p. <input type="checkbox"/> Availability of employment                                    |
| e. <input type="checkbox"/> More affordable health services  | q. <input type="checkbox"/> Higher paying employment                                      |
| f. <input type="checkbox"/> Better/more healthy food choices   | r. <input type="checkbox"/> Road maintenance  |
| g. <input type="checkbox"/> More affordable/better housing   | s. <input type="checkbox"/> Road safety   |
| h. <input type="checkbox"/> Number of health care providers  | t. <input type="checkbox"/> Health education programs<br>(pregnancy, nutrition, exercise) |
| i. <input type="checkbox"/> <i>What kind?</i>  | u. <input type="checkbox"/> Communication with community<br>leaders. Explain: _____       |
| j. <input type="checkbox"/> Culturally appropriate health services                                     | v. <input type="checkbox"/> Other: _____  |
| k. <input type="checkbox"/> Counseling/ mental health/ support<br>groups                               | w. <input type="checkbox"/> None  |
| l. <input type="checkbox"/> Better/ more recreational facilities<br>(parks, trails, community centers) |   |

### **Part 3. Health Information**

9. **In your opinion, which one health behavior do people in your own community need more information about? (Please suggest only one.)**

- |   |  |  |
|---|--|--|
| a. <input type="checkbox"/> Eating well/ nutrition  | i. <input type="checkbox"/> Using child safety<br>seats                    | q. <input type="checkbox"/> Substance abuse<br>prevention (ex: drugs<br>and alcohol) |
| b. <input type="checkbox"/> Exercising/ fitness   | j. <input type="checkbox"/> Using seat belts                               | r. <input type="checkbox"/> Suicide prevention                                       |
| c. <input type="checkbox"/> Managing weight   | k. <input type="checkbox"/> Driving safely                                 | s. <input type="checkbox"/> Stress management  |
| d. <input type="checkbox"/> Going to a dentist for<br>check-ups/ preventive<br>care       | l. <input type="checkbox"/> Quitting smoking/<br>tobacco use<br>prevention | t. <input type="checkbox"/> Anger management   |
| e. <input type="checkbox"/> Going to the doctor for<br>yearly check-ups and<br>screenings | m. <input type="checkbox"/> Child care/ parenting                          | u. <input type="checkbox"/> Domestic violence<br>prevention                          |
| f. <input type="checkbox"/> Getting prenatal care   | n. <input type="checkbox"/> Elder care                                     | v. <input type="checkbox"/> Crime prevention   |
|   | o. <input type="checkbox"/> Caring for family                              | w. <input type="checkbox"/> Rape/ sexual abuse                                       |

during pregnancy  
g. ☐ Getting flu shots and  
other vaccines

h. ☐ Preparing for an  
emergency/disaster

members with special  
needs/ disabilities

p. ☐ Preventing pregnancy  
and sexually  
transmitted disease  
(safe sex)

prevention  
x. Diabetes management

y. chronic disease  
management

z. nutrition programs

aa. ☐ Other \_\_\_\_\_

bb. ☐ None \_\_\_\_\_

**10. Where do you get most of your health-related information? (Please choose only one.)**

a) ☐ Friends and family

b) ☐ Doctor/nurse

c) ☐ Pharmacist

d) ☐ Church

e) ☐ Internet

f) ☐ My child's school

e) ☐ Hospital

f) ☐ Health department

g) ☐ Help lines

h) ☐ Books/magazines

i) ☐ Other \_\_\_\_\_

j) ☐ TV

**11. What health topic(s)/ disease(s) would you like to learn more about?**

**(Write in all suggestions.)**

---

**12. Do you have children between the ages of 9 and 19 for which you are the caretaker? (Includes step-children, grandchildren, or other relatives.)**

☐ Yes

☐ No **(skip to question #14)**

☐ Prefer not to answer

**13. Which of the following health topics do you think your child/children need(s) more information about? **(Check all that apply.)****

a) ☐ Dental hygiene

b) ☐ Tobacco

c) ☐ Drug Abuse

d) ☐ Nutrition

- |   |  |
|---|--|
| e) <input type="checkbox"/> STDs                      | m) <input type="checkbox"/> Diabetes management          |
| f) <input type="checkbox"/> Reckless driving/speeding | n) <input type="checkbox"/> Obesity Prevention /Exercise |
| g) <input type="checkbox"/> Eating Disorders          | o) <input type="checkbox"/> Lesbian, Gay, Bisexual,      |
| h) <input type="checkbox"/> Sexual intercourse        | Transgender (LGBT)                                       |
| i) <input type="checkbox"/> Mental health issues      | Advocacy/Support   |
| j) <input type="checkbox"/> Asthma management         | p) <input type="checkbox"/> Bullying Prevention          |
| k) <input type="checkbox"/> Alcohol                   | q) <input type="checkbox"/> Other_____                   |
| l) <input type="checkbox"/> Suicide prevention        |  |

### **PART 4: Personal Health**

**These next questions are about your own personal health. Remember, the answers you give for this survey will not be linked to you in any way.**

**14. Would you say that, in general, your health is...**

*(Please choose only one.)*

- |   |  |
|---|--|
| <input type="checkbox"/> Very Healthy           | <input type="checkbox"/> Somewhat Healthy    |
| <input type="checkbox"/> Mostly Healthy         | <input type="checkbox"/> Unhealthy           |
| <input type="checkbox"/> Healthy                | <input type="checkbox"/> Very Unhealthy      |
| <input type="checkbox"/> I prefer not to answer | <input type="checkbox"/> Don't Know/Not Sure |

**15. Have you ever been told by a doctor, nurse, or other health professional that you have any of the following health conditions?**

*(DK= Don't know/ Not sure; P= Prefer not to answer)*

- |   |                              |                             |                             |                            |
|---|------------------------------|-----------------------------|-----------------------------|----------------------------|
| a. Asthma                                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| b. Depression or anxiety                  | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| c. High blood pressure                    | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| d. High cholesterol                       | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| e. Diabetes (not during pregnancy)        | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| f. Osteoporosis                           | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| g. Overweight/Obesity                     | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| h. Angina/ heart disease                  | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| i. Cancer                                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| j. Sexually Transmitted Disease/Infection | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |

- |                    |                              |                             |                             |                            |
|--------------------|------------------------------|-----------------------------|-----------------------------|----------------------------|
| k. HIV / AIDS      | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| l. Hepatitis       | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| m. Stroke          | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |
| n. Substance abuse | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> DK | <input type="checkbox"/> P |

**16. In the past 30 days, have there been any days when feeling sad or worried kept you from going about your daily activities?**

- ☐ Yes ☐ No
- ☐ Don't know/ Not sure ☐ Prefer not to answer

**17. In the past 30 days, have you had any physical pain or health problems that made it hard for you to do your usual activities such as driving, working around the house, or going to work?**

- ☐ Yes ☐ No
- ☐ Don't know/ Not sure ☐ Prefer not to answer

**18. Fitness. During a normal week, other than in your regular job, do you engage in any physical activity or exercise that lasts at least a half an hour?**

- ☐ Yes ☐ No *(skip to question #21)*
- ☐ Don't know/ Not sure ☐ Prefer not to answer *(skip to question #21)*

**19. How many times do you exercise or engage in physical activity during a normal week? \_\_\_\_\_**  
***(Write number)***

*(If you exercise more than once a day, count each separate physical activity that lasts for at least a half hour to be one "time.")*

**20. Where do you go to exercise or engage in physical activity? Check all that apply.**

- |                                 |                     |
|---------------------------------|---------------------|
| a. ___ YMCA                     | d. ___ Private gym  |
| b. ___ Park                     | e. ___ Home         |
| c. ___ Public Recreation Center | f. ___ Other: _____ |

**21. If you answered “no” on Question 18, what are the reasons you do not exercise for at least a half hour during a normal week? You can give as many of these reasons as you need to. (Check all that apply.)**

- |  |  |
|--|--|
| a. ___ My job is physical or hard labor.   | f. ___ I don't know how to find exercise partners. |
| b. ___ Exercise is not important to me.  | g. ___ I don't like to exercise.                   |
| c. ___ I don't have access to a facility that has the things I need, like a pool, golf course, or a track. | h. ___ It costs too much to exercise.              |
| d. ___ I don't have enough time to exercise.   | i. ___ There is no safe place to exercise.         |
| e. ___ I would need childcare and I don't have it.   | j. ___ I'm too tired to exercise.                  |
|  | k. ___ I'm physically disabled.                    |
|  | l. ___ I don't know.                               |
|  | m. ___ Other: _____                                |

**22. Not counting lettuce salad or potato products, think about how often you eat fruits and vegetables in an average week.**

**How many cups of fruits and vegetables would you say you eat on an average day?**

**Write number of cups in the space provided.**

*(One small apple or 12 baby carrots equal one cup. Lettuce salad is the typical “house salad” with iceberg lettuce, or the salad mixes you get at the store or fast food restaurants, even if they have meat on top. Potato products are French fries, baked potatoes, hash browns, mashed potatoes... anything made from white potatoes. For the purposes of this study, ketchup is not considered a vegetable.)*

- |                                    |       |    |       |                                |
|------------------------------------|-------|----|-------|--------------------------------|
| a. Number of cups of fruit         | _____ | Or | _____ | I Never eat fruit              |
| b. Number of cups of vegetables    | _____ | Or | _____ | I Never eat vegetables         |
| c. Number of cups 100% fruit juice | _____ | Or | _____ | I Never drink 100% fruit juice |



**23. Have you been exposed to secondhand smoke in the past year?**☐ Yes☐ No *(Skip to question #25)*☐ Don't know/ Not sure *(Skip to question #25)*☐ Prefer not to answer**24. If yes, where do you think you are exposed to secondhand smoke most often? (Check only one place.)**a. ☐ Homee. ☐ Schoolb. ☐ Workplacef. ☐ Other: \_\_\_\_\_c. ☐ Hospitalsg. ☐ I am not exposed to secondhand smoke.d. ☐ Restaurants**25. Do you currently smoke? (Include regular smoking in social settings.)**☐ Yes☐ No *(If no, skip to question #27)*☐ Prefer not to answer**26. If yes, where would you go for help if you wanted to quit? (Choose only one.)**a. ☐ Quit Line NCf. ☐ Health Departmentb. ☐ Doctorg. ☐ I don't knowc. ☐ Churchh. ☐ Other: \_\_\_\_\_ i. ☐d. ☐ Pharmacy

Not applicable; I don't want to quit

e. ☐ Private counselor/therapist**27. Have you had a flu vaccination within the past 12 months?**☐ Yes, flu shot☐ Yes, flu spray

\_\_\_\_ Yes, both

\_\_\_\_ Don't know / Not sure

\_\_\_\_ No

\_\_\_\_ Prefer not to answer

### **Part 5. Access to Care/ Family Health**

**28. Where do you go most often when you are sick? (Choose only one please.)**

\_\_\_\_ Doctor's office

\_\_\_\_ Medical Clinic

\_\_\_\_ Health department

\_\_\_\_ Urgent Care Center

\_\_\_\_ Hospital/Emergency Room

\_\_\_\_ Other: \_\_\_\_\_

**29. What is your primary health insurance plan? This is the plan which pays the medical bills first or pays most of the medical bills?**

**(Please choose only one.)**

a. \_\_\_\_ The State Employee Health Plan

b. \_\_\_\_ Blue Cross and Blue Shield of North Carolina

c. \_\_\_\_ Other private health insurance plan purchased from employer or workplace

d. \_\_\_\_ Other private health insurance plan purchased directly from an insurance company

e. \_\_\_\_ Medicare

f. \_\_\_\_ Medicaid or Carolina ACCESS or Health Choice 55

g. \_\_\_\_ The military, Tricare, CHAMPUS, or the VA

h. \_\_\_\_ The Indian Health Service

i. \_\_\_\_ Other (government plan)

j. \_\_\_\_ No health plan of any kind

k. \_\_\_\_ Don't know/Not sure

I. \_\_\_\_ I prefer not to answer

**30. In the past 12 months, did you have a problem getting the health care you needed for you personally or for a family member from any type of health care provider, dentist, pharmacy, or other facility?**

\_\_\_\_ Yes                      \_\_\_\_ No (*Skip to question #33*)

\_\_\_\_ Don't know/ Not sure      \_\_\_\_ I prefer not to answer

**31. Since you said "yes," what type of provider or facility did you or your family member have trouble getting health care from? You can choose as many of these as you need to.**

____ Dentist	____ OB/GYN	____ Behavioral Health (psychiatrist, substance abuse, counseling)
____ General practitioner	____ Health department	____ Specialist (What type?) _____
____ Eye care/ optometrist/ ophthalmologist	____ Hospital	
____ Pharmacy/ prescriptions	____ Urgent Care Center	
____ Pediatrician	____ Medical Clinic	

**32. Which of these problems prevented you or your family member from getting the necessary health care? You can choose as many of these as you need to.**

- a. \_\_\_\_ No health insurance.
- b. \_\_\_\_ Insurance didn't cover what I/we needed.
- c. \_\_\_\_ My/our share of the cost (deductible/co-pay) was too high.
- d. \_\_\_\_ Doctor would not take my/our insurance or Medicaid.
- e. \_\_\_\_ Hospital would not take my/our insurance.

- f. \_\_\_\_ Pharmacy would not take my/our insurance or Medicaid.
- g. \_\_\_\_ Dentist would not take my/our insurance or Medicaid.
- h. \_\_\_\_ No way to get there.
- i. \_\_\_\_ Didn't know where to go.
- j. \_\_\_\_ Couldn't get an appointment.
- k. \_\_\_\_ The wait was too long.
- l. \_\_\_\_ Service was not within reasonable distance.
- m. \_\_\_\_ Other: \_\_\_\_\_

**33. If a friend or family member needed counseling for a mental health or a drug/alcohol abuse problem, who is the first person you would tell them to talk to? *(Please choose only one.)***

- |   |                                     |
|---|-------------------------------------|
| a. ____ Friends/Family                    | e. ____ School counselor            |
| b. ____ Private counselor or therapist    | f. ____ Doctor                      |
| c. ____ Support group (e.g., AA, Al-Anon) | g. ____ Minister/religious official |
| d. ____ Don't know                        | h. ____ Other: _____                |

### **Part 6. Emergency Preparedness**

**34. Does your household have working smoke and carbon monoxide detectors?  
(Mark only one.)**

- |                                |  |
|--------------------------------|--|
| ____ Yes, smoke detectors only | ____ Yes, carbon monoxide detectors only |
| ____ Yes, both                 | ____ No                                  |
| ____ Don't know/ Not sure      | ____ I prefer not to answer              |

**35. Does your family have a basic emergency supply kit?**

(These kits include water, non-perishable food, any necessary prescriptions, first aid supplies, flashlight and batteries, non-electric can opener, blanket, etc.)

\_\_\_ Yes

\_\_\_ No *(Skip to question 37)*

\_\_\_ Don't know/Not sure *(Skip to question 37)*

\_\_\_ I prefer not to answer

**36. If yes, how many days do you have supplies for? \_\_\_\_\_ *(Write number of days)*****37. What would be your main way of getting information from authorities in a large-scale disaster or emergency? (Check only one.)**

\_\_\_ a. Television

\_\_\_ b. Radio

\_\_\_ c. Internet

\_\_\_ d. Print media (ex: newspaper)

\_\_\_ e. Social networking site

\_\_\_ f. Neighbors

\_\_\_ g. Text message (emergency alert system)

\_\_\_ h. Other (describe) \_\_\_\_\_

\_\_\_ i. Don't know/ Not sure

\_\_\_ j. I prefer not to answer

**38. If public authorities announced a mandatory evacuation from your neighborhood or community due to a large-scale disaster or emergency, would you evacuate?**

☐ Yes *(skip to question #40)*

☐ No *(go to question #39)*

☐ Don't know/ Not sure *(go to question #39)*

☐ I prefer not to answer

**39. What would be the main reason you might not evacuate if asked to do so?  
(Check only one.)**

☐ a. Lack of transportation

☐ b. Lack of trust in public officials

☐ c. Concern about leaving property behind

☐ d. Concern about personal safety

☐ e. Concern about family safety

☐ f. Concern about leaving pets

☐ g. Concern about traffic jams and inability to get out

☐ h. Health problems (could not be moved)

☐ i. Nowhere to go.

☐ j. Other (describe) \_\_\_\_\_

☐ k. Don't know/ Not sure

☐ l. I prefer not to answer

## **Part 7. Demographic Questions**

The next set of questions are general questions about you, which will only be reported as a summary of all answers given by survey participants. Your answers will remain anonymous.

### **40. How old are you? (Mark age category.)**

<input type="checkbox"/> 15 - 19	<input type="checkbox"/> 35 - 39	<input type="checkbox"/> 55 - 59	<input type="checkbox"/> 75 - 79
<input type="checkbox"/> 20 - 24	<input type="checkbox"/> 40 - 44	<input type="checkbox"/> 60 - 64	<input type="checkbox"/> 80 - 84
<input type="checkbox"/> 25 - 29	<input type="checkbox"/> 45 - 49	<input type="checkbox"/> 65 - 69	<input type="checkbox"/> 85 or older
<input type="checkbox"/> 30 - 34	<input type="checkbox"/> 50 - 54	<input type="checkbox"/> 70 - 74	
<input type="checkbox"/> I prefer not to answer			

### **41. Are you Male or Female?**

☐ Male ☐ Female ☐ Other ☐ I prefer not to answer

### **42. a) Are you of Hispanic, Latino, or Spanish origin?**

☐ Yes ☐ No *(If no, skip to #43)*  
☐ I prefer not to answer

**b) If yes, are you:** ☐ Mexican, Mexican American, or Chicano

☐ Puerto Rican

☐ Cuban

\_\_\_\_\_ Other Hispanic or Latino (please specify) \_\_\_\_\_

\_\_\_\_\_ I prefer not to answer

**43. What is your race? (Please check all that apply.)**

\_\_\_\_\_ White

\_\_\_\_\_ Black or African American

\_\_\_\_\_ American Indian or Alaska Native *(List tribe(s) including Lumbee)* \_\_\_\_\_

\_\_\_\_\_ Asian Indian

\_\_\_\_\_ Other Asian including Japanese, Chinese, Korean, Vietnamese, and Filipino/a:  
*(specify)* \_\_\_\_\_

\_\_\_\_\_ Pacific Islander including Native Hawaiian, Samoan, Guamanian/ Chamorro:  
*(specify)* \_\_\_\_\_

\_\_\_\_\_ Other race not listed here: \_\_\_\_\_

\_\_\_\_\_ I prefer not to answer

**44.**

**A. Do you speak a language other than English at home? *(If no, skip to #45.)***

\_\_\_\_\_ Yes

\_\_\_\_\_ No

\_\_\_\_\_ I prefer not to answer

**B. If yes, what language do you speak at home?** \_\_\_\_\_

**45. What is your marital status? *(Mark only one.)***



- |   |                                    |
|---|------------------------------------|
| <input type="checkbox"/> Never Married/Single   | <input type="checkbox"/> Divorced  |
| <input type="checkbox"/> Married                | <input type="checkbox"/> Widowed   |
| <input type="checkbox"/> Unmarried partner      | <input type="checkbox"/> Separated |
| <input type="checkbox"/> Other                  |                                    |
| <input type="checkbox"/> I prefer not to answer |                                    |

**46. What is the highest level of school, college or vocational training that you have finished? (*Mark only one.*)**

- ☐ Less than 9<sup>th</sup> grade
- ☐ 9-12<sup>th</sup> grade, no diploma
- ☐ High school graduate (or GED/ equivalent)
- ☐ Associate's Degree or Vocational Training
- ☐ Some college (no degree)
- ☐ Bachelor's degree
- ☐ Graduate or professional degree
- ☐ Other: \_\_\_\_\_
- ☐ I prefer not to answer

**47. What was your total household income last year, before taxes? (*Mark only one.*)**

- |   |   |
|---|---|
| <input type="checkbox"/> Less than \$10,000   | <input type="checkbox"/> \$35,000 to \$49,999 |
| <input type="checkbox"/> \$10,000 to \$14,999 | <input type="checkbox"/> \$50,000 to \$74,999 |
| <input type="checkbox"/> \$15,000 to \$24,999 | <input type="checkbox"/> \$75,000 to \$99,999 |

\_\_\_\_\_ \$25,000 to \$34,999                      \_\_\_\_\_ \$100,000 or more  
\_\_\_\_\_ I prefer not to answer

**48. How many people does this income support? \_\_\_\_\_**

**(If you are paying child support but your child is not living with you, this still counts as someone living on your income.)**

**49. What is your employment status? *(Check all that apply.)***

a. _____	Employed full-time	g. _____	Disabled
b. _____	Employed part-time	h. _____	Student
c. _____	Retired	i. _____	Homemaker
d. _____	Armed forces	j. _____	Self-employed
e. _____	Unemployed for more than 1 year	k. _____	Unemployed for 1 year or less
f. _____	I prefer not to answer		

**50. Do you have access to the Internet?**

\_\_\_\_\_ Yes                      \_\_\_\_\_ No  
\_\_\_\_\_ Don't know/ Not sure      \_\_\_\_\_ I prefer not to answer

**51. What is your zip code? (Write only the first 5 digits.)** \_\_\_\_\_

**Thank you so much for taking the time to complete this survey!**